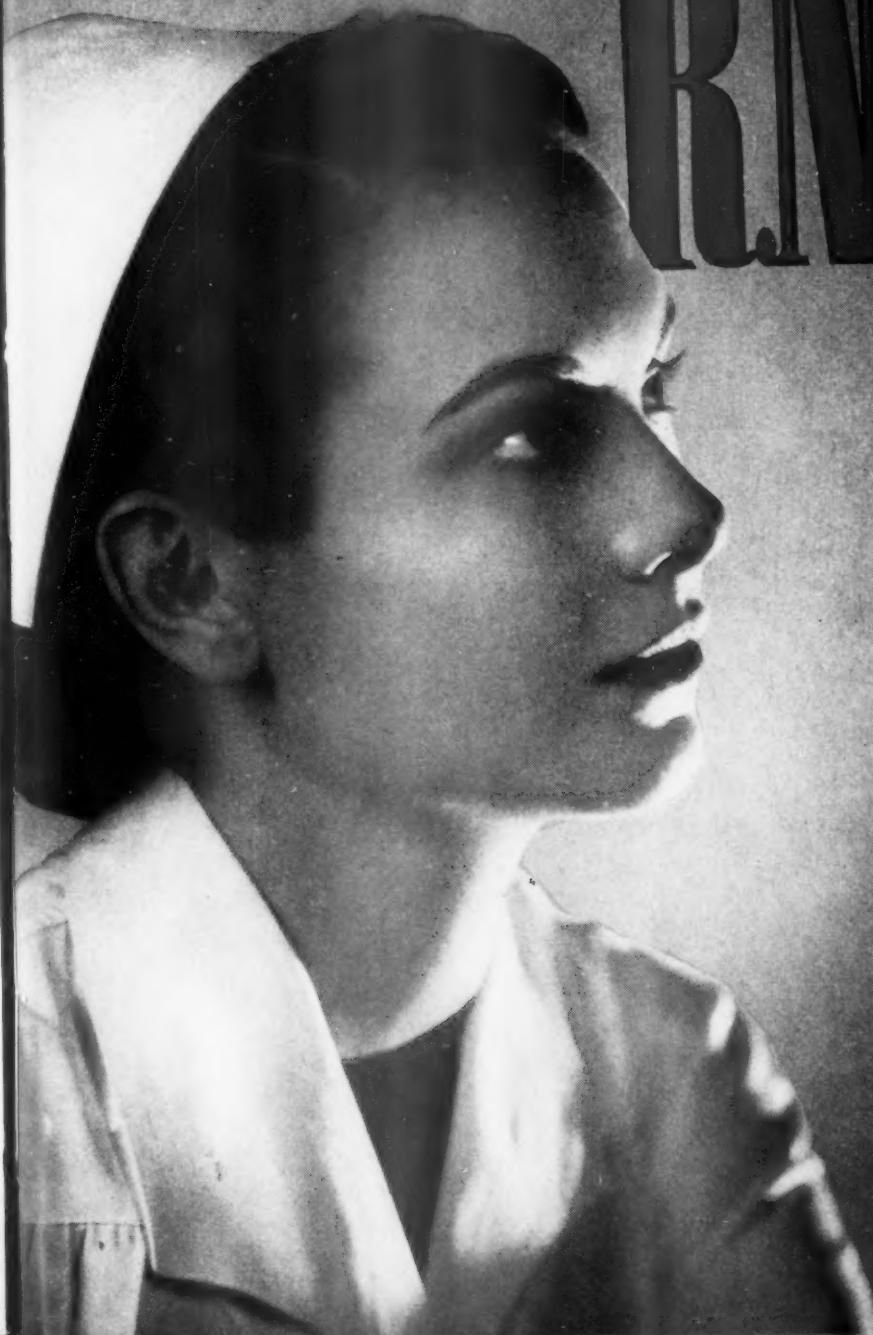


December 1946

R.I.





-A JOURNAL FOR NURSES

NIGHTINGALE PRESS, INC., RUTHERFORD, N. J.

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Cover photo by Ray Albert. Uniform, courtesy Henry Dix.

Copyright 1946, Rutherford, N.J. Circulation now 150,000 registered nurses monthly. **EDITOR:** Dorothy Sutherland. **ASSOCIATE:** Alice R. Clarke, R.N.; **ART:** Marjorie Pedretti.

I found a "Beauty Course" in a little blue jar



...one of the first things I learned in student days was what scores of nurses have known for years—to use the Medicated Skin Cream NOXZEMA for rough, red hands, externally-caused skin blemishes, tired, burning feet, and other common skin discomforts.

Then I found greaseless, stainless NOXZEMA was a wonderful night cream, that it made my skin feel so much smoother, softer.

Now I use NOXZEMA also as a cream to help soften, whiten my hands and of course I love it as a regular base for makeup. To me, it's a "whole beauty course" in a little blue jar!...



We've had a baby, too!

This yuletide, America's rising "younger set" will dine on a noteworthy development of the National Dairy Laboratories.

It is an infant food, built on a milk base. It contains all the vitamins and minerals that normal babies are known to require. They're put right *into the milk itself*—so no supplementary vitamins are necessary.

That saves time for busy mothers. It saves mistakes, too. Best of all, it provides adequate nutrition for babies at a price that even low-budget families can afford.

Formulac, this National Dairy infant food, has been tested under clinical supervision and proved successful in promoting growth and development. It has been accepted by the Council on Foods and Nutrition of the American Medical Association. It should be used upon the recommendation of a physician.

Formulac is another product of National Dairy's constant research in the field of nutrition. It is consistent with the modern idea

that it is better to prevent illness by proper feeding during the first, most critical period of human life than to try to correct nutritional disorders *after* they occur.

To that extent, it marks a real Christmas present to the nation's children.

Dedicated to the wider use and better understanding of dairy products as human food . . . as a base for the development of new products and materials . . . as a source of health and enduring progress on the farms and in the towns and cities of America.

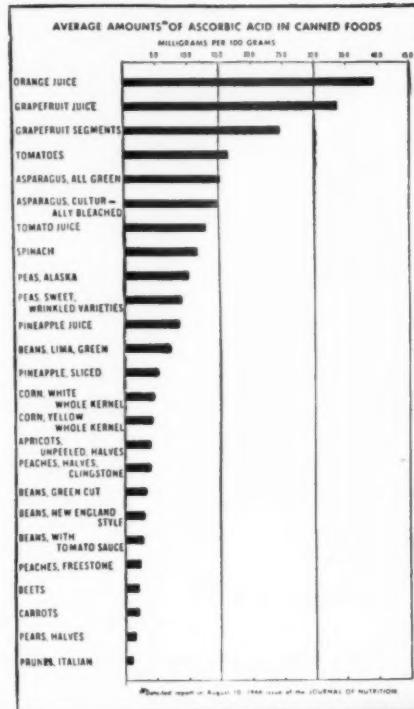


**NATIONAL DAIRY
PRODUCTS CORPORATION**
AND AFFILIATED COMPANIES



KNOWN FACTS

ABOUT THE NUTRITIVE VALUES OF FOODS PACKED IN CANS



Actual net values now available in chart form

Not just another chart, the chart on the left—and each chart in this series—presents *net* values, actual on-the-table values in foods packed in cans. Therefore, their significance is plain. As you know, the figures usually quoted in nutrition tables are *gross* figures for raw, *uncooked* foods which do not take into consideration losses which occur in transit from field to market, to kitchen, and in home preparation.

Quite true, canned foods are a truly great class of foods. However, in order for them to receive the public acceptance they merit, we realize that canned foods need the recommendation of leaders in the professional fields. We sincerely request your support. A series of twelve charts on the actual nutritional values of the most commonly consumed canned foods is now available in booklet form. For your copy, address: Can Manufacturers Institute, Inc., 60 East 42nd St., New York 17, N. Y.



No Other Container Protects Like the Can

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The Doctors behind the Doctor

● Magical penicillin . . . the amazing "sulfas" . . . and now the new streptomycin . . . Thank the men of research medicine for those . . . and for all the other aids they have placed in the doctor's "little black bag."

Biochemists and bacteriologists . . . pathologists and physiologists . . . whatever the field of research . . . they are, first and foremost, *doctors!* And, like all doctors, they are devoting their lives to the cause of human health.



R. J. Reynolds
Tobacco Company,
Winston-Salem, N. C.



According to a
recent independent
nationwide survey:

**MORE DOCTORS
SMOKE CAMELS**
than any other cigarette



DEBITS & CREDITS

Commercial?

Dear Editor:

The idea of collective bargaining is degrading to the nurses who still feel they have a profession. It takes us out of the professional class into labor and we will lose prestige.

We who have done private duty nursing realize the expense to the patient. Recently I was one of three nurses attending a hospital patient for three months. Her expenses were \$47 a day, plus laboratory work, infusions, transfusions, and medicine. She was paying the limit that her income would allow.

In little more than a year, the New York hospitals have raised our fees from \$6 to \$8, plus bonuses. Before too long practical nurses will be replacing registered nurses on private duty cases.

You younger nurses had better think twice before you commercialize our noble profession, and remember the spirit of Florence Nightingale.

CAROLINE E. RENNEKER, R.N.
NEW YORK, N.Y.

[Most private duty nurses believe that \$8 is a reasonable fee for eight hours of private nursing care. This amount is also considered standard

in metropolitan areas in most parts of the country. No information is available on any "bonus" system.—THE EDITORS]

Procedure

Dear Editor:

I particularly liked the article "How to Hold Your Own at Meetings" [R.N., August], and would like to see more articles along this line. An outline on how to open and close a meeting and a discussion of same would be welcomed.

MARIE FOX, R.N.
HONDO, CALIF.

[R.N. will publish such articles during 1947.—THE EDITORS.]

No Luxury

Dear Editor:

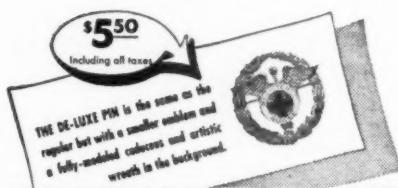
I think the public still needs the services of all branches of the nursing profession . . . We nurses are required to teach, repair, and restore sick people to good health and a more normal way of living.

Why should anyone want to deprive another of her livelihood? Why the present criticism of the private duty section? What is private duty but specialized nursing on an individual? Any nurse who has trained



There is only one national emblem for all R. N.'s just as there is only one national flag for all 48 states. This emblem identifies you as an R. N. anywhere. Illustrated are the Regular and the DeLuxe pins. They are truly beautiful because master-jewelers designed and made them. The emblem is gold-plated sterling silver with baked-enamel blue cross on etched-gold background. Both pins have positive clasps. We never seem to have enough, so, order now!

It is unlawful for any person other than a Registered Professional Nurse to wear these pins.



R. N. SPECIALTY COMPANY
15 East 22nd Street, New York 10, N. Y.

Gentlemen:
Please send me

Regular pin at \$2.50
 DeLuxe pin at \$5.50

Check or money order enclosed.
No C. O. D's.

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Address.....

Registry Number.....

RN

in a registered hospital will know how very sick a person can be and how unreasonable it is to expect a staff nurse to give him sufficient care in addition to taking care of a whole ward of patients. Is individual care for a very sick person to be called luxury nursing?

R.N., BROOKLYN, N.Y.

Degrading

Dear Editor:

Recently I started to work in a small private hospital as assistant charge nurse. The majority of nurses working general duty are practicals; some have had training, others just donned a uniform and cap and claimed they were nurses. These practical nurses work by the day and are paid up to \$7. In general they are uncouth and rough without the slightest concept of good nursing. Both the charge nurse and I, who are on the staff, do not average \$5 per day. We do all the treatments and take all the responsibility. In addition, we must listen to and try to appease complaints from patients, visitors, and doctors.

I know that nursing is a thankless profession but I love it regardless of the fact that conditions such as the one I've reported are degrading to nurses in general.

R.N., UNION CITY, N.J.

Unity

Dear Editor:

What can these nurses be thinking who would risk their professional status, their freedom and independence of action by participating

now
and
get a
care
whole
care
called

In home nursing...

WHENEVER DENTURE CARE IS YOUR PROBLEM



SOAK

Soak 15 minutes in solution (or overnight) (1 glass water to capful Polident)



RINSE

Hold under running water to rinse—THAT'S ALL

Home nursing care inevitably requires the greatest patience with many annoying factors. • The safe and thorough cleansing of artificial dentures, however, need not be one of these offensive, finger-soiling duties, if you let the patient gently slip the dentures in a glass of POLIDENT solution. • Without the need for brush or cleansing powder, POLIDENT chemically dissolves food particles, mucoid plaques and stains within a few minutes—soaking dentures clean—thus obviating distasteful handling, and minimizing the hazards of damage by dropping or abrasion. • Once you've tried POLIDENT, you will want to recommend it to all your patients with dentures. Please use coupon for professional sample. HUDSON PRODUCTS, INC., 8 HIGH STREET, JERSEY CITY 6, N. J.

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. . . Chicago . . .**

We will help you find the place you want no matter where you are today, no matter where you ask for location. Distance is never a barrier. The telephone, the air mail letter, the night letter make Seattle or Miami or San Diego or Hawaii . . . or any place you are . . . as close to Chicago as though you registered with us from Elgin, Illinois, a scant forty miles away.

No matter where you are . . . no matter where you ask to go . . . we'll help you find the finer task you want, provided only that you have integrity, that you have common sense and earnestness, that you have that kind of understanding that gets its work done always better than it need be done . . . and love the doing it. No matter where you are . . . if you are an administrator, staff nurse or anaesthetist, supervisor or public health nurse . . . or if you need finer personnel, we ask that you write to us; we are famed for finding just what you want.

Our booth at the Clinical Congress of the American College of Surgeons is D-6. It will please us if you will call.

The MEDICAL BUREAU
THIRTY-SECOND FLOOR
PALMOLIVE BUILDING
CHICAGO 11

in and promoting unionization of nurses? Would they forsake their civil liberties to become slaves to a dictator? Then, why give up their professional distinctions and become slaves to union leaders? Can terms such as *closed shop* and *division of duties* be applied when human lives are at stake?

Shall we allow ourselves to be led by an outside disinterested group which puts its own gains before those of the people it proposes to help? If we nurses will devote our total energy and enthusiasm to our own professional organizations, we will reap far greater benefits than the small monetary gains the union promises to seek on our behalf.

DOROTHY L. TRICE, R.N.
BROOKLYN, N.Y.

World War I Vets

Dear Editor:

Regarding a national group to represent veteran nurses, I believe World War I nurses should also be included. I have met some fine nurses from World War I who are still active and am convinced that they would do much to help in such an organization.

DOLORES M. GILL, R.N.
BRONX, N.Y.

Caution

Dear Editor:

I disagree with one point in your "Memo," [R.N., Sept.] where you say nurses should be cautious in their demands for better wages else "they will be eased out of jobs by partly

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*Note to
Nurses:*

Here is what we're telling your doctor about Bishop Blue Label Needles and other new products now available.

J.B. & Co.

**NOW AVAILABLE
FOR CIVILIAN USE**

Bishop Blue Label Needles

To most physicians who were in military service, Bishop "Blue Label" Needles are already familiar and trustworthy friends. Their unusual ability to perform well, even under the most adverse conditions, has been proved beyond all question by the millions of "Blue Label" Needles supplied to the armed forces before and during World War II. Bishop now makes available to civilian practitioners as well, these same "Blue Label" Needles, unsurpassed for keenness and resistance to breakage, with the special hand finished Bishop point—ideal for every hypodermic needle use.

Available, through your regular source of supply, in a complete line of standard lengths and gauges. Write today for booklet describing Bishop "Blue Label" Needles and the other products illustrated at the right of the page. Medical Products Division, J. Bishop & Company Platinum Works, Malvern, Pa.

* U. S. Pat. applied for.

J. Bishop & Company

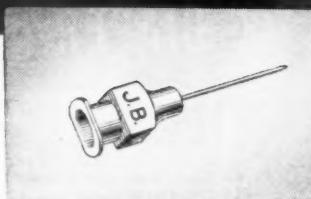
PLATINUM WORKS

In Canada: Johnson Matthey & Mallory, Limited, 198 Clinton St., Toronto 4.

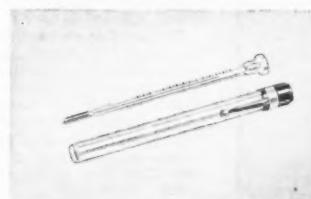
SERVICE TO SCIENCE AND INDUSTRY



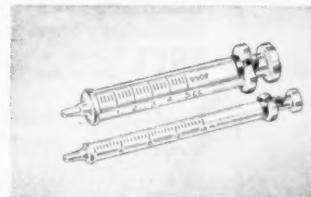
OTHER NEW
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THE "ALBALON"** NEEDLE
the first plastic hub needle.



BLUE LABEL CLINICAL THERMOMETERS-Accurate-sturdy-easily read.



BLUE LABEL SYRINGES Durable
—close-fitting—clearly marked.



SINCE 1842



Dennison DIAPER LINERS

Physicians and nurses have found that Dennison Diaper Liners make the diaper problem simpler and easier for new mothers. Physicians and nurses recommend Diaper Liners because they are sanitary and so soft next to baby's tender skin that they help prevent chafing and help guard against diaper rash.

Diaper Liners make diaper washing much less disagreeable. Hours of hard scrubbing are eliminated. The Liner is simply folded inside diaper. When soiled, the Liner is flushed away. Quick, simple, easy!

Suggest Dennison Diaper Liners to new mothers, and to your hospital, too. The cost is only a few cents a day.

Deluxe: 180 for \$1.00;
Cradle Time & Downysoft: 180 for 69c.

DENNISON, Dept. M-278
Framingham, Mass.

FREE Please send me a whole day's supply of Dennison Diaper Liners.

Name.....

Street.....

City..... Zone.....

State.....

trained, willing, and much less expensive practical nurses."

If these practical nurses fill the needs of the hospitals, why send our young women through three years of slave labor? Right now, in Los Angeles and other cities, hospitals are giving girls one year's training and sending them out as "trained aides." They are also paying them well while taking this training. If I were a young girl again, just starting out to satisfy my desire to help the sick, that is the kind of training I'd take.

I don't see that R.N.'s need to be too cautious. In a few years there just won't be any registered nurses as we know them now. I believe there will be a medical setup similar to that in the Army—medical technicians, surgical technicians, aides trained to assist in delivery room, nursery, and surgery. R.N.'s will be needed only as supervisors and instructors.

MONA E. QUINE, R.N.
LONG BEACH, CALIF.

[R.N.'s "Memo" offered "a word of caution" to A.N.A. and labor unions to not compete with one another "for some astronomical figure which the hospitals cannot meet." It urged organizations to remember their purpose is to help the R.N., not to force her into a "luxury wage class."—THE EDITORS.]

Publicity

Dear Editor:

Why doesn't the A.N.A. check on the all too frequent classification of "nurse" as it appears in newspapers,

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**NEW...
NATURAL VITAMIN D
HIGHER POTENCIES, IMPROVED FORMULA**

VI-SYNERAL VITAMIN DROPS

Now providing natural vitamin D from rich fish liver sources, and increased potencies of vitamins A and C . . . with pyridoxine and pantothenic acid added . . . Vi-Syneral Vitamin Drops is unexcelled as a multivitamin supplement for the infant's diet. **NO INCREASE IN PRICE.**

more than vitamins A and D alone

Each 0.6 cc. provides:

Vitamin A*	5000 U.S.P. Units
Vitamin D*	1000 U.S.P. Units
Ascorbic Acid (C)	50 mg.
Thiamine (B ₁)	1 mg.
Riboflavin (B ₂)	0.4 mg.
Pyridoxine (B ₆)	0.1 mg.
Niacinamide	5 mg.
Pantothenic Acid	2 mg.



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In 15 cc. and 45 cc. packages
with dosage marked dropper.



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That recognition you've been waiting for, wondering why it was slow in coming. We're happy to observe that all over the country working conditions for nurses are improving, salaries, hours. We've been able to compare, for nurses from everywhere register with us for West Coast positions. Even though improvement is universally general, we still find that in most instances the West Coast leads. Most of our hospitals will have their nursing staffs on a FIVE-DAY FORTY-HOUR week by the first of the year. Salaries are above those in other sections of the country. Why don't YOU take advantage of these conditions? Write us. We'll tell you how.

ANAESTHETISTS—(a) For clinic hospital near ocean between Los Angeles and San Francisco. (b) Private general hospital, San Francisco Bay region; \$300.

ASSISTANT TO SUPERINTENDENT OF NURSES—Large county hospital east of San Francisco; will carry out teaching program for aides and do follow-up work on wards; \$275; maintenance at \$39.

GENERAL DUTY—(a) Tuberculosis nurse; segregated department of 75-bed county hospital; \$210; California coast. (b) Copper mining company hospital, Nevada; altitude 7,000; \$222, maintenance. (c) Alaska; general Catholic hospital located on coast; climate similar to Seattle's; \$240, maintenance at reasonable rate in nurses' home.

HEAD NURSE—For 75-bed county hospital; \$235, increases; maintenance obtainable at \$45.

SURGERY NURSES—(a) Clinic hospital, 50 beds, near Coast; California; \$250. (b) Surgery nurses; \$220, overtime for call; 100-bed general hospital on San Francisco Bay. (c) Two; 75-bed general hospital beautifully located on Monterey Peninsula; \$215, overtime for call; maintenance at \$45.

OBSTETRICS—(a) Charge nurse, delivery room; 100-bed general hospital on San Francisco Bay; \$220. (b) Obstetrical supervisor; postgraduate course and supervising experience required; Oregon; \$250.

LABORATORY TECHNICIAN—(a) Experienced technician; degree or several years' experience; 125-bed general hospital, Southern California; \$190, meals, railroad fare and agency fee paid. (b) For well-established clinic, San Joaquin Valley north of Los Angeles; \$300.

Business and Medical Registry

609 South Grand Ave., Los Angeles, Calif.

(Agency) Elsie Miller, Director

magazines, and articles depicting persons of unsavory reputations.

Frequently, unfavorable criticism is directed toward "nurses" when in truth the subject is a chambermaid, practical nurse, or hospital attendant. Some form of correction should be made even if it means having it appear in a column similar to "Voice of the People" in newspaper dailies.

(MRS.) A. J. MOORE, R.N.
BROOKLYN, N.Y.

Dissatisfaction

Dear Editor:

Instead of conducting a survey on the doctors' opinions of nurses, the A.N.A. might better have surveyed what nurses think of nursing. Perhaps the results might have served to direct a campaign for that more abundant life that's supposed to be every American's just due, not excluding nurses.

Professional efforts might be more profitably invested toward creating national registration and some sort of social security, for instance. Any measures that could be devised for the purpose of streamlining nursing, intending to abolish all the outmoded and rather stupid forms that have retarded its growth since its beginning, seem very much in order at this time.

There is something basically wrong beyond merely the low level of living and working conditions in hospitals. Has anyone mentioned the working relationship of the nurse to the doctor and the problems that have been created?

R.N., BOSTON, MASS.



HYGIENIC VALUE OF A "BEFOREHAND" LOTION

Better protection for hands in and out of water all day long

When you follow your usual practice of washing your hands and then using a hand lotion, undoubtedly some of the hygienic value of soap and water cleansing is lost.

TRUSHAY was specially formulated to be applied BEFORE washing. It's just the thing for hands that must be scrubbed many times a day. TRUSHAY helps prevent depletion of the skin's natural lubricant...aids in keeping hands soft and smooth...the dermal tissue normal and unbroken.

And since TRUSHAY is applied BEFORE washing, you get all the benefits of this fine, creamy, exquisitely-perfumed hand lotion and still retain the hygienic value of soap and water cleansing.

Give your hands a TRUSHAY treat today... and recommend TRUSHAY to your patients.



A product of Bristol-Myers Company, 19NC W. 50th St., New York 20, N.Y.

petrolatum to promote optimal conditions for burn healing...

'VASELINE' PETROLEUM JELLY

is the world's leading brand of
PETROLATUM U.S.P.

With normal nutrition and absence of infection, the burned surface heals.

To prevent potential infection, and thus promote optimal conditions for burn-healing, many physicians find prompt covering of the wound is imperative . . . with a dressing impervious to infection, non-injurious to cells, non-adherent to the burned tissue. 1, 2, 3

Now . . . as a result of civilian disaster and burn tragedies of the war . . . a new treatment for burns has been developed.

In addition to plasma, and chemotherapy internally or intravenously,¹ doctors cover burn surfaces promptly with dressings impregnated with petrolatum. With these non-adherent dressings, wounds are left to "rest" undisturbed for days, without the necessity for frequent changes of dressings . . . without the accompanying re-exposure of the burn surface to infection, too.

'Vaseline' Petroleum Jelly dressings, non-injurious to cells, protect against surface infection from the air . . . help relieve pain from exposed sensory nerve endings . . . promote optimal conditions for healing of the burn surface.

'Vaseline' Petroleum Jelly, for hospital and professional use, is available in tubes and jars at drug stores everywhere. 'Vaseline' Borated Petroleum Jelly in tubes only.



Vaseline
REG. U. S. PAT. OFF.
PETROLEUM JELLY

1. J.A.M.A. 125:536-543 (June 24) 1944
2. J.A.M.A. 125:612-616 (July 1) 1944
3. Ann. of Surg. 117:885 (June) 1943

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This Booklet Tells You How A Spencer

Prevents Undue Back-Fatigue
Relieves Tired Feet
and Legs

For Your Copy
Send Coupon Below

Your Spencer will be designed especially for you. It will lift your tired, sagging muscles — will guide your body into balanced posture. Proper body-balance relieves muscular backache—lessens strain on feet, arches, legs—helps allay fatigue.

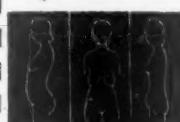
It will be light, flexible, comfortable. Although created just for you, it will cost little or no more than a ready-made support!

Just send coupon for free information, or look in telephone book for "Spencer corsetiere" or "Spencer Support Shop."

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137 Derby Ave.,
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Send free booklet. I
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Lordotic Breast Ptoitic
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This Spencer Support was designed especially for this woman to provide restful support to abdomen and back, and to provide healthful posture.

**SPENCER INDIVIDUALLY
DESIGNED SUPPORTS**
Reg. U.S. Pat. Off.

For Abdomen, Back and Breasts

THE NURSES' FAVORITE WHITE SHOE CLEANER



NOW BETTER THAN EVER!

Wartime research has made GRIFFIN ALLWITE—the white shoe cleaner you've voted your favorite in survey after survey—whiter, brighter, finer than ever!

Wait 'til you see the beautiful, snowy, rub-off-resistant finish the new and improved GRIFFIN ALLWITE gives your shoes. And GRIFFIN quality assures you that the chemically neutral formula of GRIFFIN ALLWITE is absolutely safe for all white shoes—leather or fabric—no matter how often you use it.

In the bottle or in the tube, GRIFFIN ALLWITE is more than ever your best buy today!

GRIFFIN

THE GREATEST NAME IN SHOE POLISH

1872
Accepted
1946



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is generally accepted by the medical profession as a standard therapeutic agent, being so recognized for more than 70 years.

As a laxative—it is gentle, smooth-acting without embarrassing urgency.

As an antacid—affords effective relief. Contains no carbonates, hence no discomforting bloating.



DOSAGE: Laxative: 2 to 4 tablespoonfuls

Antacid: 1 to 4 teaspoonfuls, or
1 to 4 tablets

Caution: Use only as directed.

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prepared only by

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Liquid

4-oz. bottle

12-oz. bottle

1-pt. 10-oz. bottle

Tablets

box of 30's

bottle of 75's

bottle of 200's



Pain of dysmenorrhea may be promptly relieved by 'RIONA' Capsules which combine the antispasmodic effect of 'Propadrine' hydrochloride and the analgesic effect of acetophenetidin and aspirin.

'RIONA'

Capsules

Sharp & Dohme, Box 7259, Philadelphia 1, Pa.

Gentlemen:

Without charge, please send me a clinical trial package of 'RIONA' Capsules.

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Street _____

City _____ State _____



SCIENCE SHORTS

Experiments conducted while Drs. Breazeale and Dunn were with the 191st General (U.S.) Hospital in France, proved that tobacco smoke in sufficient concentration will influence the accuracy of various serological tests for syphilis.

Dr. Thomas Rivers of the Rockefeller Institute for Medical Research refuted a belief that a worldwide influenza epidemic would occur this winter when he spoke before the National Academy of Sciences.

Swedish scientists, Drs. Hugo Theorill and Hans Davide, while laboriously training bacteria in the hope that they would destroy the tubercle bacilli, isolated a substance, pyolipic acid, which differs from streptomycin in that it actually kills the tuberculosis germs rather than just inhibiting their growth.

The Board of Education in Philadelphia reports that one out of ten pupils in the public schools show evidence of malnutrition.

There are two major types of flu virus—*influenza A* and *influenza B*. The maladies caused by these have identical symptoms but their im-

munological reactions are quite different. The vaccine used by the Army is a mixture of both types, A and B, producing effective protection against influenza B.

According to a Veterans Administration press release, there are over 7,700 veteran patients receiving treatment for tuberculosis in V.A. hospitals.

A new hypodermic needle with a plastic hub has recently been put on the market. While notwithstanding all commonly used methods of sterilization, the plastic eliminates freezing of hub and syringe tip and tends to reduce breakage. It also minimizes leakage around the syringe tip by its elastic qualities.

Benadryl, an effective allergy drug, presents the serious industrial hazard of drowsiness which is dangerous to persons operating any kind of machine, according to an article in the J.A.M.A.

Dr. Roland H. Berg, staff member of the National Foundation for Infantile Paralysis, in an article in *Hygeia*, states that physicians are now aware that three out of four

Does 2 things at same time!



**New
better, whiter
ENERGINE
SHOE WHITE
CLEANS as it
WHITENS**

NURSES everywhere are delighted with the new, better, whiter Energine Shoe White. Because it not only contains the whitest pigment money can buy, but cleans as it whitens as well. Yes—it not only gives your shoes a snowy whiteness that's beautiful, but cleans them of dirt and smudges at the same time! Doesn't do a half-way job, either, but gets them uniformly white and clean from toe to heel. Goes on in a jiffy. And there's nothing that stays on better. Try it.



cases of infantile paralysis can recover without handicap if patients are hospitalized immediately, and early and continuous use of physical therapy is instituted.

Dr. Howard A. Rusk, associate editor of The New York Times and medical director of the Veterans Administration, believes that the average hospital patient suffers 10 per cent of the time from pain and 90 per cent from boredom.

Studies on filterable virus undertaken at Duke University sheds new light on the infinitesimally minute organisms whose complex structures are surprisingly enclosed in membranes. They evidently are not molecules as was presupposed.

In a current issue of the Archives of Ophthalmology, Dr. Charles I. Thomas reports that corneal tissue cannot be preserved longer than three days before transplantation.

Mosquitoes, chiggers, black flies, sand flies and bed bugs stay away! Two new insect repellents have been announced by the Naval Medical Research Institute in Bethesda. They are called NMRI-201 and NMRI-448.

A report in the *Journal of the American Medical Association* tells of a series of studies of chronic nasal allergy which showed that about one-half of the cases were due to both inhaling and ingesting material to which the patient was allergic. Ap-



A basic baby oil of utmost purity and blandness

- When a basic oil is indicated for routine care of the infant's skin, Johnson's Baby Oil may be prescribed with confidence.

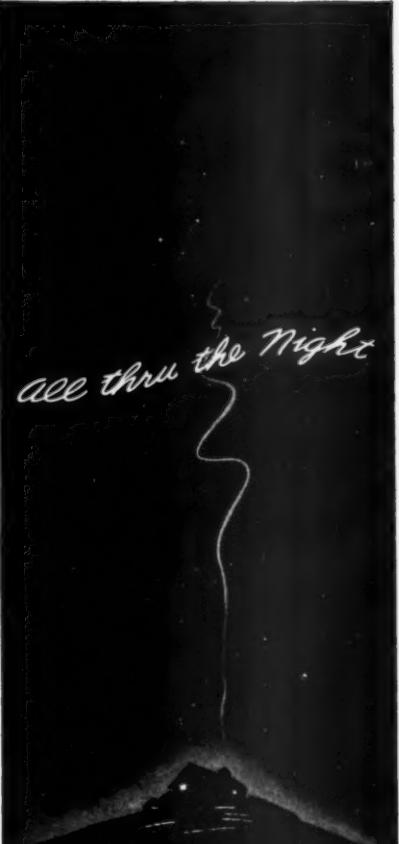
Johnson's Baby Oil is made of specially-selected, medicinal-grade mineral oils of low viscosity. Lanolin is added.

Extensive tests have proved Johnson's Baby Oil to be nontoxic and nonirritating. It will not turn rancid.



JOHNSON'S BABY OIL

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NUMOTIZINE

Acts as a topical analgesic-decongestive treatment

for inflammatory conditions, glandular swellings, contusions, strains, furunculoses, abscesses.

—a cataplasm: apply to affected parts about $1/8$ inch thick and cover with cloth or, gauze.

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900 N. Franklin Street, Chicago

proximately a quarter of the cases studied were due exclusively to inhalants and another quarter due to foods alone.

The discovery by the U.S. Army Quartermaster Corps that some persons cannot distinguish the difference between a glass of clear water and one heavily saturated with quinine, might well demonstrate the condition of some taste buds.

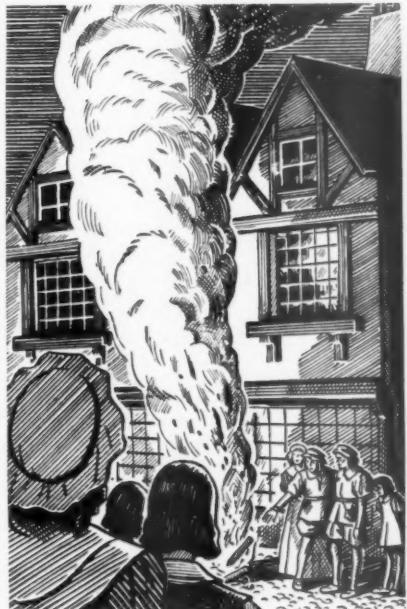
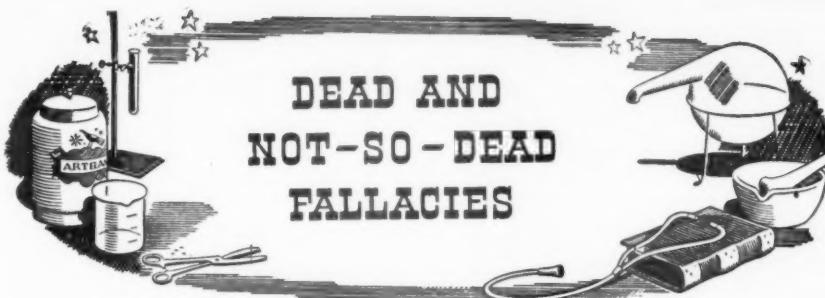
Godfrey Thompson, in the Eugenics Review, is alarmed to find, after several studies, that there is an average of two or three point decline in intelligence with each generation.

A rocking hospital bed, with an up-and-down motion for cast-bound patients, is being experimented with at New York Hospital—Cornell Medical Center in the hope that it will become an important new aid in reducing the crippling deformities of infantile paralysis.

Experiments by Navy scientists summarized in Science Illustrated, prove that continued exposure to sunlight reduces a person's visual sensitivity in dim light by 50 per cent.

Dr. Vassily V. Parin, a leading Russian scientist, recently disclaimed the announcement that Soviet doctors have a cure for cancer. Experimental treatment of some types of human cancer with the new drug KR, which is derived from fluids in persons known to have had the tropical form of sleeping sickness, is still

DEAD AND NOT-SO-DEAD FALLACIES



During the plague of 1665, Londoners lit bonfires in the streets, thinking this would "purify the air." They also killed all dogs, which they blamed for spreading the disease. Rats, the real offenders, were left unharmed.



Seeing rust on the outside of a can, leads many people, even in this enlightened day and age, to suspect that the food inside is contaminated. The truth is that, unless the rust has eaten through the metal, the food is perfectly safe for consumption.

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★ Uniform or date-dress — anything you wear is most becoming to you when *you* are becoming to *it*. Want your entire face to be more charming and expressive? Simply accent your eyelashes with safe Maybelline Mascara . . . your brows with Maybelline smooth-marking Eyebrow Pencil. Notice the soft, realistic effect of this famous Eye Make-up in Good Taste. See what a difference its subtle flattery makes! Solid or Cream Mascara — Black, Brown, Blue, 75c. Maybelline soft, smooth Eyebrow Pencil, Black or Brown. Handy Maybelline purse sizes at all 10c counters.



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WORLD'S FAVORITE EYE MAKE-UP

in the pioneering stage, says Dr. Parin in an American press release.

A new production of a white crystalline penicillin, credited with the potency of 1,667 units and described as the purest and most potent form of the wonder drug, can be stored for three years without refrigeration, according to the Princeton Laboratories of Heyden Chemical Corporation.

A new hemostatic agent known as "Hemo-pak" has been produced from seaweed. Producing a gauze-like form, it may be left in the body and ultimately absorbed.

A report in the *Lancet* tells of treating mild infections of the fallopian tubes by instillation of 20,000 units of penicillin every 12 hours. This treatment may prove of value in cases of acute salpingitis.

The *Eye, Ear, Nose, and Throat Monthly* tells of a new nasopharyngoscope which permits vision of the inaccessible pharyngeal structure—enabling the otolaryngologists to examine the "unexplored area."

"Good health alone is no insurance against colds," wrote Dr. Hobart A. Reinmann in the *Journal of the American Medical Association*, "and many of the preventive and therapeutic measures in common use are obsolete and illogical. Except for influenza vaccine there are no specific preventive procedures and treatments for colds, grippe, and influenza."

Eye-witness Reports...

IT is one thing to *read* results in a published research. Quite another to see them with your own eyes.

PUBLISHED STUDIES* SHOWED WHEN SMOKERS CHANGED TO PHILIP MORRIS SUBSTANTIALLY EVERY CASE OF THROAT IRRITATION DUE TO SMOKING CLEARED COMPLETELY, OR DEFINITELY IMPROVED.

But may we suggest that you make your own tests?



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*N. Y. State Journ. Med. 35 No. 11,590
Laryngoscope 1935, XLV, No. 2, 149-154

HEARD IN A HOSPITAL CORRIDOR

"So I said to her, 'Well, don't be a goose, Janie. Your hands aren't really ruined...though they look pretty terrible. Why don't you get some Pacquins?...We nurses always use it!'"

"I'm amazed that she didn't know about it! Pacquins has been my standby for years! It helps keep my hands looking smoother and whiter. But it never leaves them feeling sticky!"



● It's true, Nurse. Snowy, fragrant Pacquins Hand Cream will help keep your hands on the lovely side of life in spite of 30 to 40 soapy-water scrubbings a day. Use Pacquins several times a day... see if your hands don't look softer and whiter...feel smoother. Ask for Pacquins at any drug, department, or ten-cent store.



PACQUINS

HAND CREAM ORIGINALLY FORMULATED FOR
DOCTORS and NURSES



MEMO

FROM THE EDITOR

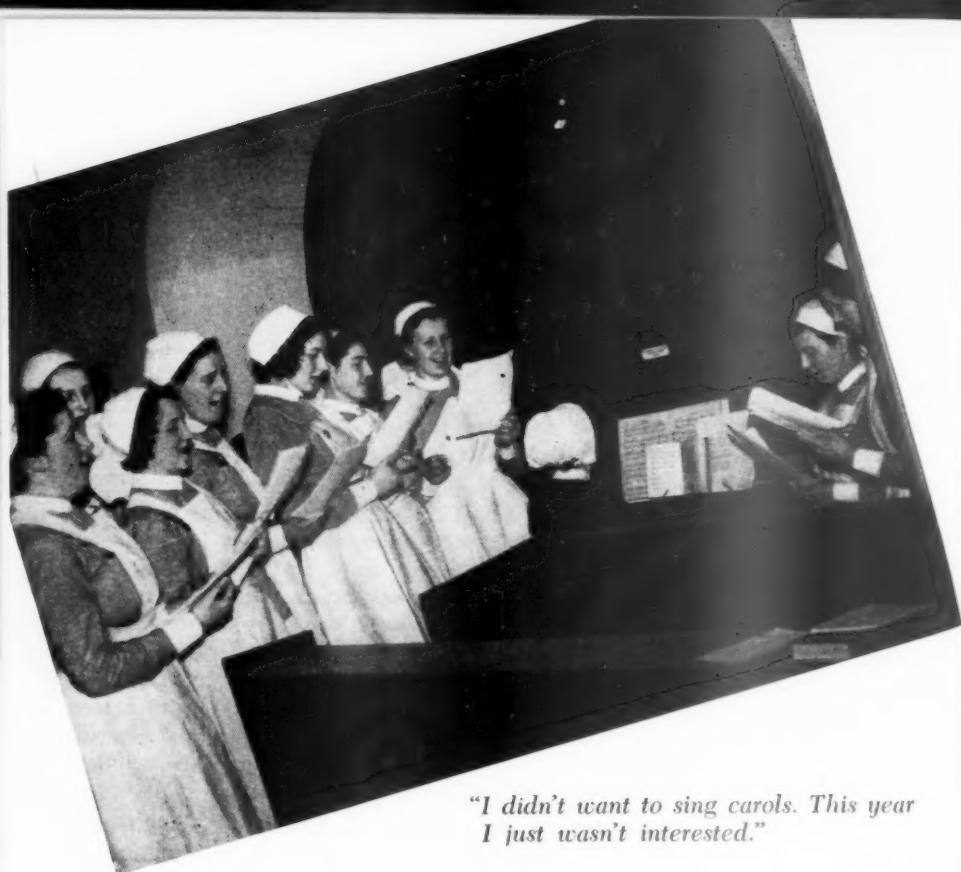
NOW THAT THE majority of State nurses associations have endorsed the A.N.A. economic security program, it's only fair to ask what the A.N.A. is going to do to help the States.

So far, the Committee on Employment Conditions is the only central means through which information may be collected, analyzed, summarized, and passed on to State associations. Yet, this committee is made up of nurses from all over the country, who hold demanding jobs. Its dynamic chairman—unquestionably better informed on economic security than any other nurse in the U.S.—is in San Francisco, beyond the reach of most of those who need guidance. Except for infrequent meetings, therefore, it is impossible for the committee to serve as a national clearing house for information on economic security or as an instrument of more than temporary leadership and inspiration.

The State associations need these: A guide to recommended standard procedure. A simple, graphic, and complete manual on the technique of collective bargaining and other economic security methods. A bibliography of pertinent labor relations laws and practices. A summary of economic security progress for nurses in all 48 States since 1900. A factual, honest, unbiased history of labor union activity in the field of nursing. A glossary of bargaining terminology. A comparison of actual regional standards on salaries, hours, and other factors affecting the welfare of nurses, with recommended minimums for these. A recommendation on the qualifications necessary for persons to be employed by the States as economic security consultants.

It is all very well to urge the States to take initiative and responsibility in running programs locally. But individual States are entitled to know the trials and errors of others and to profit by sharing mutual experience. We believe this task of interpreting and distributing facts is the job of A.N.A. headquarters.





"I didn't want to sing carols. This year I just wasn't interested."

"The Night Before Christmas—"

A Holiday Tale from England

by Barbara M. Wilcox, S.R.N.

SISTER DORCAS ALWAYS told me that it was a bad habit to carry so much in my apron pocket. She was quite right, as she usually is. For when I handed her the list of Christmas presents for the children, I must also have handed her the snapshot which I had pushed into my pocket in a hurry after I'd had my morning peep at it. She stared at

the snapshot in a queer sort of way, then she handed it back to me without a word. Of course, I blushed.

"Come on," said Sister sharply, "we've got a busy day in front of us. Where's that list I asked you for?"

"Why, Sister," I replied, surprised, for she isn't often absent-minded, "you've got it in your hand!"

"Oh yes," said Sister. "Now, two

presents for each child in the ward. Not bad in wartime."

We all knew that Sister had coaxed, bullied and persuaded everyone she knew to get those toys. Not even the bombing of Britain—and there were ominous piles of rubble quite near the hospital—and not even the blackout had stopped Sister's evening sorties through the dark streets to call on friends who might have a toy or two to spare. I wondered if any of her relations or acquaintances had managed to retain their sweet ration that month, unless they happened to have children of their own.

"You didn't think," said Sister, "that I was going to let a thing like a war spoil my children's Christmas?"

I hadn't been in Dorcas Ward very long, but I knew it would take a good deal to stop Sister from doing something for her patients. Last summer I'd been ill and Matron sent me into the country to stay with my aunt. It was there I'd met him. Oh, well, there I was again, thinking about him. What was the use? It wasn't likely I'd ever see him again.

I wasn't in the mood to be glad about anything.

Sister had spotted my lack of enthusiasm early on and had set out to cure me by giving me the worst jobs to do. To me had fallen the task of making hundreds of little pink almond blossoms to stick on the silvered branches of trees. It was a messy job and took a lot of my off-duty time. I had come to expect the less attractive tasks, and so this morning I was surprised when Sister

told me to arrange the Crib.

Arranging the Crib was a nice job; even I got a bit of a thrill out of it. The children watched me breathlessly as I took one little figure after another out of the box in which they were packed away. All the children, except little Harry. He was a difficult child, homesick and unfriendly. He kept throwing his toy onto the floor and then howling to have it back. I tried tying it to the cot, and then he got it wedged between the bars and howled even louder. After a while, Sister came over to him.

"Take the toy away, Nurse," she commanded. "He only wants it when he hasn't got it, like a good many older people."

She didn't look at me, yet I felt as if she meant me, and as if she could see right into my heart. I blushed again.

"If the cap fits, Nurse," she said tartly, "by all means wear it."

She glanced down at the Crib and pounced on one of the shepherds, standing in front of the Manger and moved him over to the other side.

"He always stands on the right of the Manger," she said.

"Yes, Sister," I answered.

What on earth did it matter, I thought.

"I suppose you think me a fussy

Barbara Wilcox has written several books about hospitals and has been assistant editor of the "Nursing Mirror," one of Britain's leading professional nursing journals.

old maid," said Sister, her eyes twinkling. She swept on down the ward, her apron rustling.

A fussy old maid? Did I think Sister a fussy old maid? I'd never thought about her that way at all. I didn't even know her name. The ward was Dorcas, and we called her Sister Dorcas after it. Perhaps she was once in love and feeling as desperate as I was now.

Arranging the Christmas roses in their little bowls, I tried to remember any gossip I had heard about Sister. Of course, there was the ridiculous rumor that she had been romantically married, back in the dark ages, and there was the less absurd rumor that she'd been offered the matronship but preferred to remain among her sick children.

At that moment, Sister called me over to her.

"By the way, Nurse," she said, "one of the choir nurses has a bad cold. I want you to sing in the carol procession tonight."

I didn't want to sing in the carol



procession. Last year I'd have been delighted and flattered to be asked. I'd envied the nurses dressed in their dark cloaks and scarlet hoods, carrying lanterns in their hands and going through the wards singing the carols I loved. But this year I wasn't interested. I didn't even look for-

ward to Christmas day, with the present-giving and one of the surgeons carving the dinner and Sister serving "austerity" Christmas puddings. I'd gone down to the kitchens with the others and stirred them—



and as I stirred I'd made a wish. But that wish hadn't come true.

"Oh, thank you, Sister," I said, "but I don't want to, really."

"You have quite a good voice," said Sister, "and you should be proud to be asked."

"Oh, I am, truly, Sister," I assured her, "but I'd rather not."

She looked at me and sighed.

"Very well, Nurse," she said. "Go and fetch the box of Christmas tree ornaments."

I went off down the darkened corridor, with the blackout curtains down and the light dimmed. I picked the box up gingerly. We all knew that Sister Dorcas had carefully hoarded the pretty gilded birds, the witch balls, the brittle colored bells from year to year, for there were none to be bought now. I carried the box back to the ward, absorbed in my own dark thoughts; so absorbed, in fact, that I never noticed a pail of water left there for a moment by the maid, who was giving the ward kitchen a final scrub. I walked straight into it. Crash on the ground went the treasure box!

Crash went all the gilded ornaments, smashing into a thousand winking, sparkling pieces.

Out came the ward maid, shrill voiced, telling Sister it wasn't her fault and people should "mind where they were going." Out came Sister. Now for it, I thought. The Christmas tree spoiled, the pretty treasures broken.

Sister spoke to the ward maid.

"Sweep up the pieces, please," she said.

Then she turned to me.

"Go and tidy yourself, Nurse," she ordered, "then come to my office."

I went to tidy myself. I stared at myself in my bedroom mirror, a pale face with dark lines under the eyes. I ate a couple of chocolates my mother had sent me from her ration, to hearten me up a bit. After all, Sister had a right to be mad with me. I wouldn't blame her, whatever she said. I wished I hadn't mooned along like that.

I knocked at the office door.

"Come in!" called Sister.



The little office looked very cozy. There was a bright fire burning on the low hearth, a row of Christmas cards on the mantelshelf, a bowl of flowers on the table.

"Sit down, Nurse," said Sister indicating a chair in front of the desk. "I won't be a minute."

I sat down on the very edge of the chair.

"The chair won't bite," Sister remarked, looking up.

I sat a bit further back.

Sister blotted what she was writ-



ing, then turned to me. I got up quickly and stood in front of her desk.

"I'm sorry, Sister," I said. "I really am very sorry."

"Oh, yes?" replied Sister. "And what for, if I may ask?"

"Why," I cried, "about—about—breaking the Christmas ornaments, of course."

"Oh, that!" said Sister. "That was an accident. We'll forget it."

I was astonished. I gaped at her. Then I remembered something else I wanted to say.

"And, Sister, if it isn't too late, I'll sing in the carols."

"Of course," said Sister gravely, "I always knew you would."

Then she smiled.

"Now, Nurse," she said. "Now what about you?"

"Me?" I murmured.

"Yes, you. I really can't have one of my nurses moping all over Christmas. What's the matter with you? Out with it!"

"Nothing," I muttered.

"Nonsense. When a healthy young woman goes [Continued on page 72]

Prepayment Plans...

Prospects for the New Year

by Ross C. McCluskey

THE NOVEMBER ELECTIONS, which drove all but the last nail into the coffin of the New Deal, proved also to be a tremendous setback for advocates of a federal system of compulsory sickness insurance. But it was not unexpected. Such individuals as Senators Robert Wagner, James E. Murray, and Claude Pepper, as well as the Social Security Administration's stalwarts, Arthur Altmeyer and Isidore S. Falk, knew a year ago that it was "do or die" in 1946. They made a tremendous effort to put over the Wagner-Murray-Dingell bill, but it came to naught. They are about to make another effort—a rather dispirited one this time—and it also will come to naught.

A Franklin D. Roosevelt might have put it over in 1946. But Harry S. Truman saw his whole domestic program, including the W-M-D bill, thrust contemptuously aside by a Democratic Congress. And in 1947 he must face a Republican Congress that is icily opposed to "do good" liberalism. A new Wagner bill will be introduced, the President will go through the motions of endorsing it, there may even be Congressional hearings on it. But it won't pass, in 1947 or in any foreseeable year.

The new bill, now being polished by the Social Security Administration and the U.S. Public Health Service, will contain a considerable number of modifications and "concessions" designed to make it more palatable to the health professions. But it will still propose a federal system of compulsory insurance.

Much better (but far from certain) are the chances of another na-



tional health bill, one to be introduced by Senator Robert A. Taft as a successor to his 1946 measure, the Taft-Ball-Smith bill. The Senator, after a series of conferences with physicians, has modified his original proposal; he will ask for further suggestions during Senate committee hearings. Actually, prospects for the new Taft bill will not be any too bright in the coming session, for the Republican Congress is expected to concentrate on a handful of vital problems and shy away from any

legislation involving "spending programs."

Those Congressmen who are returning to Washington have had an opportunity this fall to read the record of hearings on the W-M-D bill. And there was a wealth of testimony, a great deal of it by persons of dubious qualifications.

ARGUMENTS FOR THE WAGNER BILL

On the whole, proponents of S.1606 were generally agreed on these points:

- Large numbers of Americans are denied medical care because they cannot pay for it.
- Many areas of the country have no physicians because they cannot support them.
- The level of health in the U.S. is disturbingly low—below that of some



other countries—because of inadequate medical care.

- Voluntary prepayment plans cannot now, or ever, cope with the problem because they do not "go all out" in their attack on it.
- The Wagner bill does not involve "socialized medicine" but is simply a system of insurance.
- Such a system would not infringe upon the right of free choice, either for the doctor or the patient.
- The American Medical Association has consistently opposed prepayment

because it might affect adversely the income of doctors.

- The proposed national program is as American in character as the public school system.
- There is widespread demand for its enactment.

CASE FOR THE OPPPOSITION

Opponents of the bill—mostly representatives of the A.M.A. and other medical organizations — countered with these arguments:

- No American is denied medical care because he cannot pay for it; hospitals, clinics, and private physicians do a large amount of charity work.
- Those who want to insure themselves against the costs of illness may do so through voluntary plans.
- Many sections have no doctors simply because they have little or no population.
- The level of U.S. health is not only high but is rising constantly.
- Voluntary plans, given time, can solve the problem of the costs of medical care.
- The W-M-D bill would not create an insurance system but would establish federally controlled medicine financed by taxation.
- The bill specifically limits free choice by denying a beneficiary access to a physician who (1) has a full panel; (2) lives in a different lo-



cality; (3) does not participate in the program; or (4) is a specialist.

► The A.M.A. opposes any federal system because it would reduce medicine to an assembly-line routine.

► The concept of compulsion is un-American, having been first developed by Bismarck as part of a regimentation program.

► Wherever compulsory prepayment has been introduced, medicine has deteriorated (e.g., Germany, England, New Zealand).

► The public school system is not comparable because it is controlled by the State, county, and locality, whereas medical care would be controlled by Washington.



► The Gallup Poll has demonstrated that there is no particular demand for a federal system.

► Medical care is not the sole factor involved in good health; there are other improvements that could be undertaken to enhance public health before we resort to compulsion.

★

Meanwhile, the American Medical Association, after years of inaction, had decided to promote medical society prepayment plans on a nationwide scale. It would not, it said, establish any single national plan but would, instead, encourage the "grass roots" development of individual plans by medical societies in States

NATIONAL HEALTH AIMS OF SENATORS WAGNER AND MURRAY AND THEIR ASSOCIATES*

OBJECTIVE: A national system of compulsory sickness insurance for about 80 per cent of U.S. citizens. **METHOD OF FINANCING:** Payroll deductions equivalent to 3 per cent of earnings (up to \$3,600); supplemental appropriations from federal general revenue. **BENEFICIARIES:** The vast majority of men, women, and children, regardless of their ability to pay for medical services. **BENEFITS:** General and specialist medical care (with specific limitations); hospitalization; nursing in home or hospital; laboratory procedures, etc. **COMMUNITY-WIDE HEALTH SERVICES:** Expanded public health activities; special services for mothers and children and for crippled children; medical care of the needy. **PROFESSIONALLY ELIGIBLE:** Any legally qualified physician, dentist or nurse. **REMUNERATION:** Fee-for-service; salary; annual per capita fees for panel patients; or any combination. **OVERALL DIRECTOR OF THE PROGRAM:** Surgeon General of the U.S.P.H.S.

*As exemplified by the Wagner-Murray-Dingell bill, S.1620. A new version will be introduced before the 80th Congress.

and counties. In brief, the A.M.A. lent prepayment its prestige but withheld its organizational power. To its Council on Medical Service, it delegated the job of establishing a code of minimum standards; medical society plans meeting them would be entitled to the A.M.A. "seal of acceptance." And the parent body sanctioned the formation of a national, cooperative, service organization: Associated Medical Care Plans, Inc.

A.M.C.P. will function much like the hospital plans' Blue Cross Commission. It will accumulate actuarial and administrative data, promote reciprocity among the plans, lend a hand in establishing new ones,



act as trouble-shooter generally. Although it is an autonomous organization, ostensibly controlled by its constituent plans, A.M.C.P. is closely linked with the Council on Medical Service. Its policies, therefore, are largely determined by the council and, more remotely, the A.M.A.'s Board of Trustees and House of Delegates.

Neither the Council nor A.M.C.P. will develop any "model plan" or otherwise attempt to impose its views on State and county societies. Such things as organization, administration, benefits, premiums, may vary widely among different plans—and they do. California Physicians' Service, for [Continued on page 84]

NATIONAL HEALTH AIMS OF SENATOR TAFT AND HIS ASSOCIATES*

OBJECTIVE: A joint Federal-State program to provide medical care for all persons unable to pay for it, in full or in part. **METHOD OF FINANCING:** Federal grants-in-aid (estimated at \$225 million a year) to States which would match them, \$2 for \$1. **BENEFICIARIES:** Persons and families in the low-income group. **BENEFITS:** General and specialist medical care in hospitals, clinics, and similar institutions and, at the option of the State, in the home. **COMMUNITY-WIDE SERVICES:** Assistance in medical research, development of dental programs for school children, and aid in the study and care of neuro-psychiatric disturbances. **PROFESSIONALLY ELIGIBLE:** Presumably all legally qualified doctors, nurses, and dentists. **REMUNERATION:** Fee-for-service, salary. **OVERALL DIRECTOR OF THE PROGRAM:** A National Health Administrator appointed by the President with the advice and consent of the Senate.

*As exemplified by the Taft-Ball-Smith bill, S.2143. A new version will be introduced before the 80th Congress.

They Learn—for World Peace

HEALTH IS THE common denominator which will tie the world together in peace. Among health agencies, American nursing is first to give more than lip service to the belief that facts on modern methods of care for the sick must be freely exchanged by civilized nations throughout the world. Since the formation of a World Health Organization, young nurses of Britain and France have come on government missions to observe in outstanding American hospitals. But recently, through UNRRA, 100 graduate nurses from five countries have received refresher courses in New York.

Photos by Gottlieb, International News



Students are supervised by Maj. Frances Frazer of UNRRA, and her assistant, Lt. Dorothy Sutherland. Doctors and nurses of city hospitals participate in teaching sterile techniques.

Housed on Welfare Island, sponsored by City Department of Hospitals, these nurses form a cadre to spread knowledge to thousands of others in their native lands.



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Nurses from China, Italy, Poland, Czechoslovakia, Yugoslavia, observe unfamiliar procedures like pneumothorax. Uniforms are former ANC seersucker. [Turn the page]



Lt. Sutherland, not R.N., editor, is instructor for Chinese group. On porch of Triboro T.B. Hospital, she watches student practice serving nourishment to wheelchair patient.



Instruction covers new methods in medical nursing, T.B. and other contagious disease care, plus teaching techniques. Students have time for play, however, practicing modern dancing off-duty.



Evening hours are spent together, sharing mail and news from home. UNRRA foots bills allowing \$100 for clothing, \$40 for books, and \$180 expenses for four months.



They Learn— for World Peace

[Continued]

Medical texts in English are difficult, even for those who know the language well. In this group, Chinese students are most proficient linguists.

Course ends this month. United in common desire to ease pain of war-torn and disease-ridden humanity, these nurses have tied bonds of friendship and understanding through mutual work and play.



How to Influence Your Own Future

by Edward L. Bernays

THE PEOPLE in every civilized country are demanding an expanded and more adequate nursing service. In each country, professional organizations are bluntly taking this position:

Unless the professional status, education, and economic conditions of nurses are greatly improved, the profession cannot attract enough superior candidates to nursing schools to guarantee proper standards of nursing service. The day has gone when, because of only a few possible vocational choices, women of superior attainments are attracted to nursing. Potential students today apply realistic tests to the professional, social and economic returns they envisage as graduate nurses.

Six major issues confront the profession in the U.S. today. They may be resolved through uncontrolled circumstance or chance unless you yourself do something about it:

1. The issue of economic security. A nurse does not achieve tenure, as do teachers; she is not protected against arbitrary action by employers; and her salary or fee, never adequate, has on the average not risen commensurately with the cost of living. Compensation of nurses should be based on the educational requirements of the profession and the re-

sponsibility they must assume.

2. The issue of legal status. There are Nurse Practice Acts which set standards and control the practices of registered nurses in every State and the District of Columbia. Practical nurses are licensed only in nineteen States. The issue here is the extent to which the registering of nurses should be standardized on a national basis. Until all nursing registration acts are mandatory, how can you hope to improve nursing practice?

3. The problem of counselling and placement. This is a matter of giving counsel and advice in such a way as to enable one to find the right nurse



for the right job at the right time. It is a two-way street, however, in that it is also the matter of finding for every nurse the best job for her particular qualifications.

4. Recruitment—the task of finding more student nurses, and persuading more registered nurses to take postgraduate work. Unless a solution is reached to this two-part issue, we shall see an even greater

shortage of new nurses for the future, and the present crop of graduate nurses will not progress as rapidly as they might.

5. Funds for nursing education. Where are such funds to come from, and under whose control are they to be administered? Funds should ideally come primarily from endowments and tuition fees. The main issue is that such funds should not be provided and administered by hospitals which, in their capacity of employer, misuse student nurses during the period of their training. Student nurses are exploited in even the best schools. Hospitals own the schools in 90 per cent of the cases. The danger to patients from the use of student nurses is self evident. This issue has been coming to a head for many years and concerns all interested in the future of American nursing.

6. The distribution of service. Nursing service, like other forms of professional care, is not equally available. It must be distributed

in the nurse's professional status and economic situation.

There are three ways in which change can be effected:

The first is by law. Constituted authority, on different levels of government, enforces action by means of legislation.

The second is through public opinion. Public opinion in a democracy is a potent force; without winning it no activity can carry on effectively. And by winning public opinion we do not mean merely attempting to sway beliefs by newspaper campaigns and other such tactics. Effective public opinion involves the support of important groups in society.

The third is through action by organization. The nurses' professional organizations must play their part in insuring the cooperation of their members. Your aggregate strength as a number of individuals is far less than it is when you join together for organized action.

No one of these methods constitutes in itself your final recourse in an attempt to improve your position or to gain your ends. The mere passage of a law, or favorable public opinion in support of a limited or particular objective, or a brief organizational flurry—none of these, considered separate from the others, is the solution to the problems that confront you today. Only when law, public opinion, and organization are coordinated in their approach will you be successful.

If we act as a united, cohesive group on all three fronts, we shall make progress; otherwise, we shall



evenly to any and all who need care, whether in rural areas or urban. This question of rural cases has been most neglected, although it is particularly important today.



Primarily, a satisfactory solution for these issues will involve changes

continue to be at the mercy of forces beyond our control . . .

The nurses' economic well-being, and an intelligent revision of the statutes which determine the profession's legal status depend primarily upon government action. Possibly the situation with regard to raising funds for nursing education also does to some extent. Granted that this is so, we again face a situation in which comprehensive legislation can be enacted only when public opinion has been brought to bear in favor of it. Further, public opinion won't be so informed and aroused unless your professional organizations play their part in awakening the public to an understanding of the issues and per-

suade it to support remedial action.

We cannot rely upon legal action for aid in counseling and placement or recruitment, or probably in the long run in finding funds for nursing education, or the distribution of nursing care. We must rely here almost entirely upon an awakened public opinion and a vigorous, effective, and intelligent professional approach to these problems.

In thinking and planning about these major issues the responsibility rests squarely on the shoulders of you nurses and on the efforts of your professional organizations.

The American Nurses' Association is the logical organization to act in behalf of [Continued on page 74]

Probie



"Uh---Happy New Year."

Calling All Nurses



NURSES WHO WANT to locate friends whose addresses have been recently changed or become lost during the past few years may submit for publication, without charge, a short notice of about 75 words "calling" for information about any other registered nurse.

ANN SHIMP: Haven't heard from you since January 1946 when you were at San Diego, Calif. How about a letter? Evelyn Mann, Apt. 6, 1084 Bryden Rd., Columbus, Ohio.

L.T. MAE RAMSEY, A.N.C.: Served with 77th Evacuation Hospital at Fort Leonard Wood, England, North Africa and Italy. Very important! Please communicate immediately with Edmee Nystel, 1452 Pleasant Ave., Los Angeles, 33, Calif.

ELIZABETH WENHART: Came from Ohio and worked at Mineola Hospital, Long Island, N.Y. and the Women's Hospital, New York City. I think of you often and wish you'd write. Frances Madigan, 42 Elmwood Ave., Burlington, Vt.

DOROTHY REIGLE: Last I heard you were nursing in Arizona. Where are you now? Hazel B. Watts, 417 South Emerson St., Monticello, Ill.

CATHERINE RYAN: Although I don't know her home town, I do know that she is registered in Ohio. She was last seen with the 100th Evac. Hospital in Fleetwood, England in June 1944. It's been a long

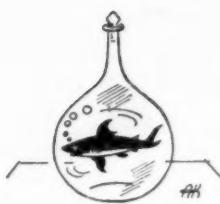
time and I miss you. Jane M. Chestnutwood, 4339 Fifth St., Luna Pier, Mich.

L.T. MARGARET BRUNSON, L.T. MARGARET MCGRATH: The former from South Carolina; the latter from Kansas City. Both were stationed at Roswell in 1943. Do you know them? Maxine Pence, Holmesville, Neb.

L.T. DOROTHY SCHOLL, A.N.C.: Was formerly stationed in Manila and last heard from in November 1941. Any word of whereabouts will be greatly appreciated. Edwina Parks, 362 East First Ave., Chico, Calif.

MRS. HELEN LUDDY TYNDA: Former captain in the A.N.C. located at Hamilton Field. I'm very anxious to locate her. Kathleen Neal, School Nurse, Ironton, Ohio.

VIRGINIA LOU BEDFORD: Graduate of Mt. Sinai Hospital, New York City. Was last heard of from New Mexico or Arizona. Please communicate with Louise Avant Phillips, 308 Mercer St., New York 3, N.Y. or with Ruth E. Pierson, 345 West Fourth St., New York 11, N.Y.



Liquid Gold— the Story of Vitamin A

by Ruth B. Scott, R.N.

IT IS JUST A SMALL brown capsule. Yet the amber yellow oil in the tiny container has taken its place in medicine because there were men on the high seas and workers in quiet laboratories who labored to provide it. When you purchase the small capsules of vitamin A you buy a part of the hazardous work of fishermen who engage in the business of gathering the fish that yield a commercial vitamin we term "A".

Most of the fish whose livers contain vitamin A oil are now caught from ships that leave the shores of the west coast from California to Alaska. Prior to 1937, when a fishing boat caught a soupfin shark or similar species called the grayfish (dogfish) it was probably tossed back into the sea, accompanied by heated remarks, because it had fouled up the nets and had no commercial value. But in that year chemists found that these discarded fish were living mines of liquid gold. The commercial catch skyrocketed. Boats that had made a business of food fish converted to shark fishing. Although outfitting and conversion were expensive, a group of five or six men found that they could return to port with a catch worth \$75,000. A

new gold rush was on in earnest.

In 1938 and 1939 the total shark liver catch on the Pacific Coast increased ten times over the 1937 figure. Dangers and expense were high and the work was arduous for when a boat ran into a large catch the men worked day and night, sometimes with decks awash. Fishermen were lost when boats capsized, there were explosions and fires at sea, and heavy waves broke the light crafts or forced them on rocks during fogs.

Yet despite the cost of gear that has been installed in over five thousand boats, fishermen continue to in-



crease their investments because they are willing to gamble that the natural oil will continue to be the chief commercial source of vitamin A. Although vitamin A has been synthesized it is not expected that sufficient amounts will be available to discard the natural oils.

The story of vitamin A begins on some waterfront like Seattle where

54 per cent of the United States supply of the oil is refined.

Before the fishing vessel leaves the port, tons of crushed ice from the waterfront ice plant are sent into the hold through a chute. As the ice melts, fish are caught and stored between layers. Thus, if all goes well, a ship will leave fully loaded and come back in the same manner. Sometimes, however, a vessel returns with a small catch—a heartbreak for the crew who may not make operating expenses. When the catch is good, all hands share equally after the "boat share" and food costs are deducted.

Fuel tanks are filled at the dock-side oil company and there must be extra fuel for emergencies, such as refueling another ship. Complete medical supplies are put aboard including bottles of the vitamin that the men will supply, for these fishermen are firm believers in their own product and take it religiously.

Food must be carried for double the contemplated trip for there is always a chance that loss of power or some other eventuality may mean delay. Many of the fishing fleet have picked up survivors of marine accidents so they must be prepared to fill extra mouths.

The boats usually leave ports like Seattle in the evening and it takes from twenty to sixty hours to reach the ocean fishing banks. When the banks are reached all go on deck, even the cook, who is an equal share owner. And, a cook must be something of a magician for he works on the catch but also produces three full

meals a day and several "coffee snacks" on schedule.

There are three types of gear used by the fleet. Gill nets have been developed for the soupfin shark and the otter trawl for grayfish tows a 500 mesh net that spreads into a funnel shape. The halibut boats have



bait hooks which sink to catch the fish on the bottom of the sea. There may be 120 hooks to a "skate" and ten to fourteen skates tied together to a "string" so that a boat using this method may have a "line" of as many as 2,000 baited hooks.

Just as soon as the fish are taken from the hooks or removed from the nets they are dressed. Precious livers are removed to double seam, forty pound cans, surrounded by ice. If food fish are being caught they are iced down in the bins. Livers may constitute 10 per cent of the catch value of food fish, yet this is the part that was formerly discarded.

Because vitamin A is so unstable, loss occurs through enzyme, bacterial action, and oxidation, the instant the fish dies. Every effort must be made to keep the livers safe and pleasant and prevent deterioration that gives an off-flavor and odor to the finished oil. Many of the livers are processed immediately at the ports so the thorough chilling is sufficient, but if they are to be [Continued on page 78]



RN Meets the Queen Elizabeth Nurses by Carolyn Valentine

SHE'S A LOVELY SHIP—she really does have a beautiful soul." As Sister Evans, senior nurse aboard the Cunard luxury liner *Queen Elizabeth* spoke, the other nursing sisters nodded approval. It was immediately apparent that the three women on the staff love this ship for as they say, "she is happy."

Men and women who follow the sea—and these nurses are no newcomers to maritime life—believe that ships are living things. To them a ship can inspire an intense loyalty and devotion, and become more than mere working and living space. The nurses believe, too, that the *Elizabeth*'s background of war service, and the lives she transported safely have influenced her present personality. For, although this largest of all ships is young in years she has helped to write a part of history.

Now the six years and 492,635 miles of wartime travel are behind her. Decks that were worn by military boots have been replaced; gray war paint has given way to the colors of peace. The hull is shiny black, the superstructure gleaming white and the two huge funnels carry the red and black of the Cunard line. The blackout paint, standee berths, tem-



porary sanitary facilities, and troop fittings are gone and the 83,673 ton Queen has emerged from war service to fulfill the luxury state for which she was built.

The nursing sisters for peacetime service were chosen with special care for duty aboard the *Queen Elizabeth*. The line officials insisted that the nurses be over 27 years of age, and that they have a back-

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Tea-time is traditional aboard the Queen. Nurses sometimes take a tray to their quarters.



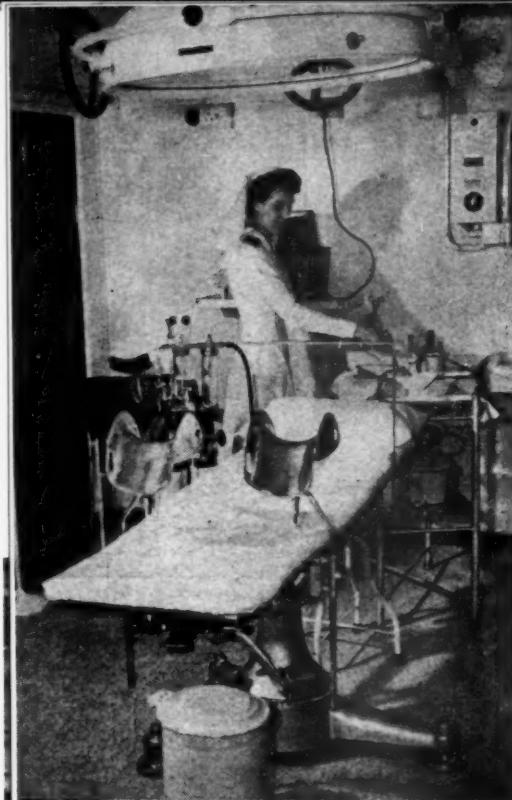
ground of nursing experience above ordinary. All of the selected three are also State Certified Midwives, experts in massage and remedial exercises, and they have had many years of private duty nursing, a prime requirement for the position.

All wear the traditional white uniform, but they also carry the distinctive Cunard epaulet of royal blue with a gold circle around a red cross.

The white uniforms have gold buttons and each nurse wears the silver and blue pin of the General Nursing Council of England and Wales. The attractive and flattering veils are made of two layers of crisp organdy, beautifully hemstitched.

Sister Margaret Evans, the Senior, has nursed at sea for 16 years, and has been aboard such noted ships as the *Mauretania* and the *Britannic*. A graduate of the Royal Infirmary of Liverpool, she continued her sea-going duties during the war and traveled thousands of miles to care for noted civilians who were making important pilgrimages.

Sister Ruth Winifred Derrick, a graduate of London Hospital, spent five and a half years at sea before the war and included experience on the *Berengaria*, the *Aquatania*, and



TOP LEFT: Beautifully equipped, modern surgery is supervised by Sister Farmer, whose background is equally dramatic as the Queen's. BOTTOM: Attractive crew ward is supervised by Sister Margaret Evans.



the *Mauretania*, with a trip around the world on the *Corinthia* in 1934. Maiden voyages are not new to Sister Derrick for she made the first trip of the *Queen Mary*. During the war this Sister was in charge of the medical departments of three factories that were making radar and other valuable equipment for the war.

The third member of the nursing staff is Sister Francis Farmer, proud of having graduated from Guy's in London. She spent three years at sea before the war and during the conflict was an Army nurse. During six and a half years of service she was stationed in the British Isles, went into North Africa, and finally took part in the landings in Sicily, Salerno,

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and Anzio. These last missions were aboard a hospital carrier that accompanied the troops to the beachheads and acted as a shuttle for the wounded from the beaches to the nearest medical station. She complains that she lost a bit of time when she was invalided home twice, once with diphtheria, but each time she returned to her Army nursing.

All three of the Sisters are enthusiastic about this field of nursing, and they have definite reasons for preferring it to all others. Sister Farmer says that she took her training from the very first day with one idea in mind—to be a sea-going nurse. All agree that they like the close contact with human beings on a ship, and that the wide variety of cases that come to them are a constant source of interest. They frankly admit too, that they love the excitement of sailing and the thrill of each and every trip.

During the natural confusion of the first peacetime voyage of the *Queen Elizabeth*, the huge passenger list gave the Sisters a never-ending parade of ailments. One of the passengers fell as he came aboard and so an operation was necessary within a few hours of sailing from Southampton. A little woman of 92 was the oldest passenger, but although

the nurses assisted her aboard they had no trouble with her during the entire trip. One hypertension case suffered a severe epistaxis which required blood transfusions, but the Sisters took that in their stride too, and they were prepared for this and any other emergency.

Some difficulties arose when passengers, long rationed, overdid their visits to the well-filled tables of the dining salon. When, despite her size,



the *Elizabeth* rolled a bit one morning when she ran into a small storm, the combination of a pitching ship and overloaded tummies brought an extra quota of mal de mer to the nursing staff.

The nurses are never surprised to receive calls from mothers on trans-Atlantic crossings. The stomachs of young babies and children cannot be changed like the ship's clock, so there is always need for help and advice to place the young ones on revised feeding schedules.

The three nurses, assisted by two hospital attendants, and two pharmacists, care for 2,314 passengers and a crew of 1,200—a number which is far out of proportion to the size of the staff but which the Sisters assume with professional calm. They must work long hours, and all are on call 24 hours a day. Their day starts with breakfast at eight, after which they separate [Continued on page 68]

REVIEWING THE

In Memoriam

Army nurses who died in service were honored a month ago in two Washington, D.C., services. At a memorial in Arlington, Secretary of War Robert P. Patterson recalled that of 196 who met death in line of duty, fifteen died as a direct result of enemy action: six in the Jap plane attack on the hospital ship "Comfort," six on the Anzio beach-head, two in Germany, and one by enemy shelling in Belgium. The service nurse, declared Mr. Patterson, has never received her due, principally "because she has gone about her work with such skill and quiet modesty that it has been customary to take her for granted."

At another ceremony in the home of Maj. Gen. Norman T. Kirk, Surgeon General of the Army, \$2,000 was presented to the Nurses National Memorial by B'nai B'rith, Jewish service organization, in memory of Lieut. Frances Y. Slanger, only U.S. Army nurse to be killed in Belgium.

Hospital Schools

The old question—"Should nurses be trained in university schools and not in hospitals?"—was internationally debated a month ago. In Toronto, Miss Nettie D. Fidler, of the University of Toronto School of Nursing,

declared that only in the independent school can the undergraduate nurse be a real student. In Buffalo, Miss Clare M. Casey, president of the New York State Nurses Association, reiterated her faith in the hospital school. She said it was



doing "a splendid job" and should not be replaced.

The "shabby system" of using students as "cheap labor" not only interferes with classroom work, said Miss Fidler, but creates an "impossible learning situation in the wards." Conceding that students can learn good nursing only by practicing it, the educator declared that they have little chance to practice effectively in crowded and understaffed wards, where, she said, they must do the work of both the R.N. and the domestic.

Countered Miss Casey: "Ninety per cent of all nursing schools are

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hospital schools. Until the time comes when scholarships are available to many young women, it would be a pity to put all schools on a university basis. We would lose some fine material."

Living Wage

United Public Workers, C.I.O., which is said to have a membership of 28,000 civil service workers in its New York District, has charged that New York City is creating a serious health menace by underpaying its public health personnel and thus forcing them to resign and seek jobs elsewhere. "The New York City Health Department is critically understaffed," says the newspaper PM. "Public health nurses there are carrying three to four times the case load set as a standard by the National Public Health Organization. Within a year there have been more than 100 resignations from the department . . . The majority are due to

been forced to accept nurses without either. Many of these, it is alleged, take the municipal jobs only temporarily to gain experience, then resign and move on to better paying jobs.

The U.P.W.A. wants a base scale of \$2,600 to \$3,200 for public health nurses; recently the A.F.L. Central Trades Council of the city demanded a \$3,000 minimum for all R.N.'s in municipal service.

Housecleaning

The Veterans Administration's new broom, Miss Dorothy V. Wheeler, was busy a month ago sweeping over-age nurses out of key positions and replacing them with vigorous women in their thirties. (Miss Wheeler is 34.) Within thirty days of her appointment as director of nursing service, Department of Medicine and Surgery, Miss Wheeler had seven of her thirteen branch offices headed by women between 35 and 40, all with wartime service records.

Pausing in a lightning tour of V.A. hospitals, Miss Wheeler announced several of her objectives:

Expansion of personnel to provide one nurse for every five patients. Already on the roster were 9,700 nurses and the new director said she'd



the fact that the base salary offered —\$1,500 to \$2,400 a year, with annual increments of \$120—just does not begin to make it possible to exist under today's cost of living."

Although New York has rigid employment standards calling for special training or experience in public health work, says the union, it has





WHEN NUTRIENT INTAKE IS *of Particular Importance*

The need for an augmented intake of specific nutrients frequently arises in surgery—postoperatively, during the course of febrile complications, following blood loss, in traumatic surgery, and in the management of septic and infected lesions. Metabolically, these conditions raise the protein and B complex vitamin requirements as well as that for ascorbic acid, and increase the need for caloric energy to offset tissue wasting and loss of weight.

When metabolic needs are raised,

the delicious food drink made by mixing Ovaltine with milk fills a special need. This dietary supplement provides the specific nutrients needed in abundant quantities. Patients enjoy its delightful taste, and drink the recommended three glassfuls daily with relish. The table of composition amply illustrates the contribution it makes. Of particular importance is its low curd tension, which allows rapid gastric emptying and no interference with the appetite.

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Ovaltine

Three servings daily of Ovaltine, each made of
½ oz. of Ovaltine and 8 oz. of whole milk,* provides

CALORIES.....	669	VITAMIN A.....	3000 I.U.
PROTEIN.....	32.1 Gm.	VITAMIN B ₁	1.16 mg.
FAT.....	31.5 Gm.	RIBOFLAVIN.....	2.00 mg.
CARBOHYDRATE.....	64.8 Gm.	NIACIN.....	6.81 mg.
CALCIUM.....	1.12 Gm.	VITAMIN C.....	39.6 mg.
PHOSPHORUS.....	0.939 Gm.	VITAMIN D.....	417 I.U.
IRON.....	12.0 mg.	COPPER.....	0.50 mg.

*Based on average reported values for milk.

have 12,000 by July 1, 1947.

New training programs, which would bring top-drawer teachers from medical schools to lecture in V.A. hospitals and send outstanding nurses to medical schools for advanced training.

Miss Wheeler, former executive secretary of the New York City Nursing Council, took over from Miss Gwen H. Andrew. Miss Andrew, who has been acting director of nursing service since January, went to the Wadsworth (Kan.) Veterans Hospital as chief nurse.

Wacs Not Weak

Maybe there is something to the old notion that men are more resistant to disease than women, says the War Department, but the evidence of Wac illness during the war indicates the difference isn't great. After studying its statistics, the Army says that while the sickness rate of Wacs was higher than that of military personnel as a whole, the women soldiers "showed no outstanding disqualifying weakness as a group." In the face of hardships overseas, it adds, there was little difference in sickness rates of men and women.

Hospitalization rate in the U.S. for illness and injury (and excluding battle causes) was 793 Wacs per thousand per year, compared with 506 per thousand for all military personnel.

Respiratory diseases and influenza hospitalized 160 Wacs per thousand per year, as against 100 per thousand for the Army as a whole.

Pneumonia: 100 Wacs per thousand, 140 per thousand for all personnel.

Mental ailments: 37 Wacs per thousand, 40 per thousand for all personnel.

To Each Her Own

A trade union and a nurses' association are eying each other warily in Vancouver, British Columbia, where collective bargaining for R.N.'s is booming. The British Columbia Registered Nurses Association—which is seeking to become bargaining agent throughout the province—has been certified by the provincial Department of Labor to act for the nurses of St. Paul's Hospital, Vancouver. But nurses who belong to the Hospital Employees Federal Union (A.F.L.) are negotiating with the board of the Vancouver General Hospital through W. M. Black, agent of the union.

Socialization

British doctors were asked last month to stand up and be counted as for or against the new system of nationalized medicine proposed for England by its socialist government. The British Medical Association sent out questionnaires to 58,000 practitioners, with the explanation that if a large majority of them refused to "work within the framework" of the proposed system, it would be inoperable. Such a decision, declared the *British Medical Journal*, would in no wise constitute a strike. Doctors, it



In the treatment of chronic constipation the restoration of peristaltic rhythm may be effectively and pleasantly achieved with the administration of Saraka.

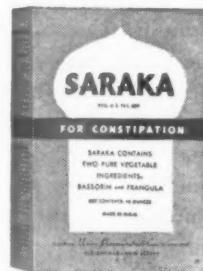
The principal factor in this modern bowel regulator is bland emollient, jelly-like bulk... supplied by bassorin.

To provide a gentle stimulus to atonic intestinal musculature for initiation of the defecation reflex, Saraka also contains a small quantity of specially treated cortex frangula.

When peristaltic rhythm has been re-established with Saraka, regularity can be maintained with Saraka-B, which supplies bulk alone.

Saraka and Saraka-B are prepared in smoothly-coated granules... pleasant and easy to take... economical to use. After meals, or before retiring, one or two teaspoonfuls are placed on the tongue and swallowed with water.

A clinical sample of Saraka will be sent upon request.



UNION PHARMACEUTICAL COMPANY, INC., BLOOMFIELD, N.J.

added, "will always continue to serve the sick public. An act is not necessary to make them do this."

The government plan, which has been vigorously opposed by the B.M.A., would provide free medical, nursing and dental services for Britons. Hospitals would be owned by the government, with doctors, nurses, and technicians on the national payroll.

Fuel to the Fire

Faced with a grave shortage of nurses in hospitals, the Canadian Parliament has discovered that it may have legislated more of them into retirement. Under a new law, the income tax exemption of a man is reduced (from \$1,500) by the amount of his wife's earnings in excess of \$250 and up to \$750. If she earns more than \$750, both get a single-person exemption of \$750. A Senate committee recommended that the \$250 minimum be raised to \$400, but it was ignored. Consequently, many part-time nurses are finding it no longer profitable to work.

Red Cross Treaty

Taking no chances on diplomats preventing future wars, representatives of the Red Cross societies of the world will meet in Geneva in March to map a new treaty to replace the Geneva Convention of 1929, which governed the treatment of prisoners of war in World War II. Revisions, it is said, will among other things take cognizance of such

weapons as the atom bomb and the rocket and will establish rules for the treatment of civilian internees. Japan and Germany, it is expected, will be given an opportunity to ratify the new convention.

Japan never ratified the 1929 treaty. Conditions in her prisoner of war camps were shocking, says the Red Cross, with the death rate of prisoners 15 per cent higher than under normal conditions. Germany, which ratified the treaty, and on the whole adhered to it, had a P.O.W. death rate only one per cent above normal.

'It's News to Me...'

New York Hospital solved the housing shortage for its physicians and nurses by buying three old tenement buildings and converting them into modern apartment houses . . . Washington State Nurses Association wants a forty-hour week and \$201.25 minimum a month for hospital nurses . . . Pharmacists in 44 states have agreed to fill prescriptions for veterans who are being treated by private doctors under the "home town plan" and to bill the Government . . . Nurses of the Veterans Administration helping to select one standard uniform out of half a dozen offered to them for choice . . . New York local, Registered Nurses Guild, AFL, has elected a male nurse, Aubrey Summers, as president . . . First man to get an automobile telephone is Dr. George J. Weems, Huntington, Maryland, according to Federal Communications



THE CLINIC SHOE

TRADE MARK REG U S PAT OFF AND CANADA

for Young Women in White

NURSES
TECHNICIANS
RECEPTIONISTS

America's finest shoe for young women in white who serve America day in and day out. Clinic shoes are light and airy, yet sturdy of sole. They fit so beautifully that they prevent foot fatigue long after other shoes have let tired muscles sag. Step into a pair of Clinics and save your beauty.

Unlined Clinics are built with an outside counter pocket making possible a smooth, seamless, inside finish. Clinics are made of top-grade leathers such as Hunt-Rankin's Bucko, Rueping's White Elk, also Nurocco and Evans' Brogandi Crushed Goat; all available with White Duflex Nap Soles and White heels.

Your Assurance of Clinic Quality

"We, the makers of Clinic Shoes, having made quality footwear for a third of a century, (1914-1946) pledge ourselves to continue to use the best grade of materials and to constantly strive to improve the technique of shoemaking so that you, the Clinic shoe wearer, will at all times enjoy the highest degree of comfort available in a nurse's oxford. We

further pledge ourselves to continue to make Clinic shoes the best value obtainable . . .

Oliver F. Keith

PRESIDENT

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AMERICA'S FINEST SHOE FOR YOUNG WOMEN

ALABAMA

Birmingham: Loveman, Joseph & Loeb
Mobile: Jno. J. Damrich Co.

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Fox Smith: Boston Store D. G. Co.
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Fresno: Rodder Shoe Co.
Hollywood: The Broadway-Hollywood
Long Beach: Dobyn's Footwear
Los Angeles: Broadway Dept. Store
Oakland: Chas. Kushins Co.
Pasadena: The Broadway-Pasadena
San Diego: San Diego Shoe Co.
San Francisco: The Emporium
San Francisco: Sommer and Kaufmann

COLORADO

Colorado Springs: Vorhes Shoe Co.
Denver: The May Company
Pueblo: Crews-Beggs D. G. Co.

CONNECTICUT

Bridgeport: D. M. Read Co.
Hartford: Manning-Armstrong Corp.
Hartford: The W. G. Simmons Corp.
New Haven: The Edw. Malley Co.
Waterbury: Miller-Peck Co.
Waterbury: Manning-Armstrong

DELAWARE

Wilmington: Kennard-Pyle Co.

DISTRICT OF COLUMBIA

Washington: Wm. Hahn and Co.
Washington: Frank R. Jelleff, Inc.

FLORIDA

Jacksonville: Cohen Bros.

GEORGIA

Atlanta: Davison-Paxon Company
Atlanta: Rich's, Inc.
Augusta: Davison-Paxon Company
Columbus: Miller-Taylor Shoe Co.
Savannah: Asher Shoes

IDAHO

Pocatello: The Peoples Store

ILLINOIS

Chicago: Marshall Field and Co.
Evanston: Marshall Field and Co.
Oak Park: Marshall Field and Co.

INDIANA

Evansville: Ben Becker Shoe Co.
Indianapolis: Marion Shoe Store, Inc.
South Bend: Robertson Bros. Dept. Store
Terre Haute: Ben Becker Shoe Co.

IOWA

Des Moines: Field Shoe Company
Sioux City: T. S. Martin Company

KANSAS

Topeka: Seeley Shoe Co., Inc.
Wichita: Head Shoe Co.

KENTUCKY

Louisville: Baynham Shoe Co.

LOUISIANA

New Orleans: Maison Blanche Co.
Shreveport: Phelps Shoe Co., Ltd.

MAINE

Bangor: Enterprise Shoe Co.
Portland: Davis and Cartland Co.

MARYLAND

Baltimore: S. Dalsheimer & Bro.
Baltimore: Hutzler Bros. Co.



**Lack of Space Prevents
Listing of All
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Boston: Wm. F.ene's Sons Co.
Fall River: R. A. McWhirr Co.
Holyoke: Thomas S. Childs, Inc.
Pittsfield: England Brothers
Springfield: Forbes and Wallace, Inc.
Worcester: Denholm and McKay Co.

MICHIGAN

Ann Arbor: Wm. Goodyear and Co.
Detroit: J. L. Hudson Co.
Flint: Walk Over Boot Shop
Grand Rapids: Chas. Frankla Co.
Jackson: Walk Over Boot Shop

MINNESOTA

Duluth: Fremuth's Dept. Store
Minneapolis: The Dayton Company
Minneapolis: Home Trade Shoe Store
Rochester: C. F. Massey Co.
St. Paul: The Emporium of St. Paul

MISSISSIPPI

Jackson: R. E. Kennington Co.

MISSOURI

Columbia: C. B. Miller Shoe Co.
Joplin: Christian D. G. Co.
Kansas City: Robinson Shoe Co.
St. Louis: Famous-Barr Co.
Springfield: Walk Over Shoe Store

MONTANA

Great Falls: J. E. Kenkel and Co.
Helena: Thistletwaite Shoe Co.
Missoula: Missoula Mercantile Co.

NEBRASKA

Omaha: J. L. Brandeis and Sons

NEVADA

Las Vegas: Ronzone's Dept. Store
Reno: Sunderland's

NEW HAMPSHIRE

Concord: The Thorne Shoe Co.
Portsmouth: Shaine's

NEW JERSEY

Newark: Hahne and Co.
Paterson: Stenchever's
Perth Amboy: Ruthal's

NEW MEXICO

Albuquerque: Paris Shoe Store
Santa Fe: Pflueger's

NEW YORK

Bronx: Frederick Loeser Co.
Buffalo: Flint and Kent
New York: Bloomingdale Bros., Inc.
New York: Stern Brothers
New York: John Wanamaker
Rochester: Wm. Eastwood and Son Co.
Syracuse: Park-Bronxock Shoe Co.
Troy: Wm. H. Frear Co., Inc.
Utica: C. Sauter's Sons

NORTH CAROLINA

Charlotte: Al Goodman
Durham: R. L. Baldwin Co.
Raleigh: Taylor's
Winston-Salem: Belcher's, Inc.

NORTH DAKOTA

Fargo: The O. J. de Lendrecie Co.
Grand Forks: Rand Shoe Co.

OHIO

Akron: The M. O'Neil Co.
Canton: Harry L. Smith, Inc.
Cincinnati: Porter Shoe Co.
Cleveland: Wm. Taylor Son and Co.
Columbus: The F. and R. Lazarus and Co.
Dayton: The Elder and Johnston Co.
Springfield: Nisley Shoe Co.
Toledo: The LaSalle and Koch Co.

OKLAHOMA

Enid: Newman Merc. Co.
Muskeg: Durnil's Dry Goods Co.
Oklahoma City: Kerr's, Inc.
Tulsa: Stern's, Inc., Walk-Over Shop

OREGON

Portland: Meier and Frank Co., Inc.

PENNSYLVANIA

Harrisburg: Bowman's Dept. Store
Philadelphia: S. Dalsimer and Sons
Philadelphia: Strawbridge and Clothier
Philadelphia: John Wanamaker
Pittsburgh: Kaufmann's Dept. Stores, Inc.
Reading: Manning-Armstrong
Scranton: Lewis and Reilly, Inc.

RHODE ISLAND

Providence: The Outlet Co.

SOUTH CAROLINA

Charleston: Jas. F. Condon & Sons, Inc.
Columbia: Cullum's
Greenville: Ivey-Keith Co.
Spartanburg: Wright-Scruggs Shoe Co.

SOUTH DAKOTA

Aberdeen: Webb Shoe Co.
Rapid City: F. & M. Bootery
Sioux Falls: Johnson Shoe Co.

TENNESSEE

Chattanooga: Miller Bros. Co.
Memphis: The John Gerber Co.
Memphis: Walk-Over Shoe Store
Nashville: Harvey's

TEXAS

Corpus Christi: M. Lichtenstein & Sons
Corpus Christi: Perkins Bros.
Dallas: Sanger Bros.
El Paso: The Popular Dry Goods Co.
Fort Worth: Fair Dept. Store
Fort Worth: W. C. Stripling Co.
Galveston: E. S. Levy Co.
Houston: Krupp and Tuffly, Inc.
San Antonio: The Guarantor Shoe Co.

UTAH

Salt Lake City: Z. C. M. I. Dept. Store

VERMONT

Burlington: Gee's Shoe Store
Rutland: Wilson Clothing Co.

 VIRGINIA

Alexandria: Bradshaw's Shoe Store
Danville: R. C. Thompson & Co.
Newport News: Adams Shoe Store
Richmond: Miller and Rhoads, Inc.

WASHINGTON

Seattle: Frederick and Nelson
Seattle: Nordstrom's
Spokane: The Palace Dept. Store
Spokane: The Crescent Store
Tacoma: Baxter's Shoe Store

WEST VIRGINIA

Parkersburg: Dils Bros. and Co.
Wheeling: Alexander and Co.

 WISCONSIN

Milwaukee: Milwaukee Boston Store, Inc.

 WYOMING

Cheyenne: Wasserman's Shoe Store

IN WHITE - COMFORTABLE, STURDY, BEAUTIFUL

"O-O-O-O MY FEET!"

WHY SUFFER WITH FOOT TROUBLES THAT DRAG YOU DOWN? TIRED, BURNING, TENDER, ITCHING, PERSPIRING FEET OR CORNS AND CALLOUSES GIVE YOU THAT E-X-H-A-U-S-T-E-D LOOK.

QUICK RELIEF!

GET PROMPT RELIEF WITH EFFICIENT, SOOTHING JOHNSON'S FOOT SOAP—THE OLD TIME FAVORITE FORMULA OF BORAX, IODIDE & BRAN. SOFTENS CORNS & CALLOUSES.

* AT ALL DRUGGISTS AND TOILET GOODS DEPARTMENTS

JOHNSON'S FOOT SOAP
BORAX, IODIDE AND BRAN



Confidence

... HAYDEN'S

VIBURNUM COMPOUND

The confidence of physicians in the therapeutic action of HVC is evidenced by the increasing number who are daily prescribing this preparation for women who must be on their feet all day long.

HVC is antispasmodic and sedative. It relieves smooth muscle spasms and is therefore useful not only for dysmenorrhea but also as a general antispasmodic. Non toxic, non laxative.

HVC

PHYSICIAN'S
SAMPLES
SENT ON
REQUEST

NEW YORK PHARMACEUTICAL COMPANY
Bedford Springs

Bedford, Mass.

Commission . . . Medal of merit of the Army and Navy Union has been presented to Sister Kenny for her work in polio . . . English midwives asking for legislation to permit them to wear a distinctive uniform . . . Unable to get its nurses into civilian institutions, Army Nurse Corps is thinking of running its own anesthesiology classes in military general hospitals . . . Dues of Washington State Nurses Association, which had been upped from \$4 to \$10 earlier in the year, went to \$12.50 in October. California approved increase from \$4.50 to \$20.

Cancer in Children

Early detection of cancer in children is the aim of a new clinic which will open next month in New York. Said to be the first of its kind, the service will be a component of the Strang Foundation cancer clinic system, which hitherto has restricted its examination to adults. When in full operation, the foundation will furnish diagnostic service to persons in all age brackets.

"People do not ordinarily think of cancer as a children's disease," says Dr. Elise Strang L'Esperance, of the foundation, "but it is not a rare children's disease." She is supported by statistics of the Metropolitan Life Insurance Company, which reveals that in 1944 cancer was responsible for 3 per cent of deaths among children between five and fourteen, and was a more common killer than diphtheria, measles, polio, acute rheumatic fever, or diabetes.

CAN ANY INFANT CEREAL COME UP TO THIS?



CLAPP'S INSTANT CEREAL FOR BABIES

Pre-cooked... ready to serve

Clapp's Instant Cereal is prepared from mixed cereals, fortified with vitamins and minerals, notably vitamin B₁ (thiamine) and Iron, in which the diet of infants and young children may be deficient.

INGREDIENTS

Whole Wheat Meal • Corn Meal • Wheat Germ • Malt • Non-fat Dry Milk Solids • Calcium Phosphate • Dried Brewers' Yeast • Salt • Iron Ammonium Citrate.

TYPICAL ANALYSIS

Carbohydrate	73.1%	Iron (Fe) 30 mg. per 100 gms.
Protein (Nx6.25)	15.0%	Copper (Cu) 2 mg. per 100 gms.
Fat (ether extract)	.8%	Thiamine (B ₁) 1.0 mg. per 100 gms.
Ash (total minerals)	3.8%	Riboflavin (B ₂) 0.3 mg. per 100 gms.
Crude Fiber 1.6%		Moisture 5.7%
Calcium (Ca) 800 mg. per 100 gms.		Calories per ounce 102.
Phosphorus (P) 580 mg. per 100 gms.		

NUTRITIONAL VALUES

While the quantity of Clapp's Instant Cereal used may vary considerably for the individual, $\frac{1}{2}$ -oz. and 1-oz. quantities may be considered average daily amounts for the infant and young child respectively. These amounts furnish the following percentages of the minimum daily requirements:

INSTANT CEREAL: For infants, 120% of vitamin B₁; 20% of vitamin B₂. For young children, 60% of vitamin B₁; 113% of Iron; 32% of Calcium; 22% of Phosphorus.

 The Council on Foods of the A.M.A. suggests that infant cereals may well be selected upon the basis of furnishing vitamin B₁ and Iron. Clapp's Cereals are an excellent source of these two food elements and thus are preferred for inclusion in infants' diets.

CLAPP'S BABY CEREALS

PRODUCTS OF AMERICAN HOME FOODS, INC.



CLAPP'S BABY FOOD DIVISION,
American Home Foods, Inc., Dept. 2-12
22 East 40th Street, New York 16, N.Y.

Please send me a supply of professional samples of Clapp's Instant Cereal and Clapp's Instant Oatmeal.

Name _____

Address _____

City _____ State _____



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**SINCE THEY WERE BABIES-
THE QUINTUPLETS**
always used this for coughs of
**CHEST
COLDS**

The Quintuplets have always relied on Musterole for coughs, sore throat and aching muscles from colds. It *instantly* starts to bring wonderful, long-lasting relief! Musterole helps break up painful surface congestion, too. Musterole is one rub you can suggest to your patients with confidence. Just rub in on the chest, throat and back.

In 3 Strengths: Children's Mild Musterole for the average baby's skin. Regular and Extra-Strength for grown-ups.

→ **MUSTEROLE** ←

Headache

As the House of Delegates of the New York State Nurses Association met last month to consider a new and comprehensive economic program for nurses, organized labor fired the opening gun in a dispute which may have repercussions throughout the country. For the program contained a momentous proposal: that membership in the N.Y.S.N.A. be made compulsory for any nurse employed in a hospital. And since the New York State Hospital Association had been given ample opportunity to review the document before it was made public, its sanction seemed at least implied.

Knowing that New York may set a pattern for the rest of the country, the American Federation of Labor objected violently to the stipulation, calling it a "yellow dog contract." Through the Registered Nurses' Guild, No. 1043, the union alleged that such a policy would be "a direct disfranchisement of basic American rights of nurses."

Obviously, too, it saw its own interests at stake, since the A.N.A. had declared in favor of collective bargaining and is seeking to make State associations the bargaining agent. The union realized that if the N.Y.S.N.A. were able to achieve a closed shop in New York hospitals, its own days would be numbered, for a nurse could not assign her bargaining rights to her association and to a union too.

Not only was the stipulation "illegal," said the Guild, because it asked "hospital administrators to en-

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“The Doctor’s got an appointment ... with me!”

IT ALL BEGAN when he saw me requisitioning “Lysol” for my work throughout the hospital!

He was kind of surprised, until I told him why. I explained that I knew most doctors insisted on “Lysol” for disinfecting sharps, for pre-operative and for post-natal care.

“So,” I said, “if “Lysol” does the best job in these instances, when a dependable disinfectant is *vital*, it stands to reason that it should be used *everywhere* that a thorough and effective disinfectant is essential.”

“Right,” he agreed. “As a matter of fact, with its phenol coefficient 5—more than twice that of an ordinary U. S. P. cresol compound—“Lysol” brand disinfectant does a *real* germ-killing job more economically. And does it, too, even in cleaning big areas of floors and walls.”

“But,” he went on, “I’m amazed that *you’d* think of anything like that. Seems this combination of beauty and brains necessitates observation.”

So—now the Doctor’s got an appointment—with me . . .

LEHN & FINK PRODUCTS CORP.
683 Fifth Avenue • New York 22, N. Y.



“*Lysol*”
Brand Disinfectant
REG. U. S. PAT. OFF.

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ter into a conspiracy which would prevent a qualified nurse . . . from receiving employment," but it was a violation of the association's charter, which calls for membership on a voluntary basis.

The lengthy program, "Recommended Personnel Practices for Nurses," was drawn up by the State association's committee on personnel practices, and applies to R.N.'s in hospitals, private duty, and public health.

Meanwhile, the Nurses' Guild is continuing its claims that the S.N.A. does not represent "the rank and file of nurses." It considers the association's attitude toward licensing the practical nurse as one illustration of that fact. "The average nurse,"

Guild publicity states, "is aware that not only has the law [N.Y. State Nurse Practice Act] been a failure, but it has served to tear down the standards of nursing." Controversy revolves around a waiver provision which made it possible for 90 per cent of practical nurses applying for licenses to obtain them without examination, and a declaration of the State Board of Regents that the Act is ineffective in itself and difficult to administer.

Miss Clare Casey, president of the N.Y.S.N.A., wants the law to be given further trial. Because of wartime personnel shortages, the Act was amended several times to provide easy licensing of R.N.'s in New York, and the final effective date

*Warner's**



CHAFÉZE*

PREVENTS CHAFING

Chafeze*, the soft jersey shield originated by Warner's, has proved a boon to active women. Worn next to the skin, either under a girdle or by itself, Chafeze* prevents painful chafing. It launders perfectly like any lingerie.

Sold Only in Corset Departments

Ask for Chafeze* by name
\$1.25 — Large size, \$1.50

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1946 SURVEY SUMS UP ESSENTIAL REASONS WHY

MORE NURSES USE **ARRID** THAN ANY OTHER DEODORANT



Information received from 3,221 nurses in an independent, coast-to-coast survey "boils down" to three major reasons why, among nurses, Arrid leads all other deodorants by a dramatic margin.

ARRID IS MORE EFFECTIVE IN STOPPING PERSPIRATION, ODOR

Top reason given by nurses who chose Arrid over all other deodorants. Many reported dissatisfaction with effectiveness of former deodorants. 32% *changed to Arrid* because no other deodorant stops perspiration and odor so effectively yet so safely.

ARRID IS SAFE FOR SKIN

That's one of the main reasons why more R. N.'s rely on Arrid than on any other deodorant. 39% of former users of other deodorants gave "effect on skin" as their main reason for *changing to Arrid*. Dermatologists accept Arrid as harmless to skin.

ARRID IS SAFE FOR CLOTHES

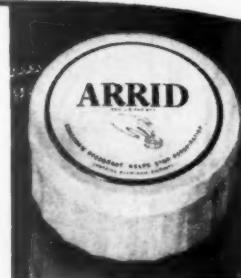
Arrid does not rot or stain fabrics. It has been awarded the Seal of Approval of the American Institute of Laundering for being harmless to clothes. 29% gave this safety factor as their major reason for *changing to Arrid* for a regular deodorant.

Note: Research techniques, exact percentages, and detailed results are available to authorized groups.

No Other Deodorant, ONLY ARRID, Stops Perspiration and Odor so EFFECTIVELY yet so SAFELY!

ARRID Gives You Unequalled 3-Way Protection:

1. Arrid really protects you from offending others. No other deodorant, only Arrid, stops perspiration and odor so effectively yet so safely.
2. Arrid is really safe for your skin. "Arrid is non-irritating," report leading skin specialists. Used by many doctors and nurses. Antiseptic. Gentle.
3. Arrid really protects your clothes. Stops perspiration, so prevents stains. Wins American Institute of Laundering Seal "Harmless to Fabrics."



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Sensitivity to our client's qualifications has been developing steadily in our organization for over fifty years and the habit of "remembering" our members has become firmly rooted during all these years. Our bureau is now internationally known as a good friend and a valuable contact for candidates for positions in the professional and allied fields. Our close contact with members is the basic working method by which candidates are able to keep constantly on the alert for the golden opportunities in their specialty. *Why not try us?*

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was pushed ahead till July 1947. Miss Casey believes that the law should not be repealed until it has been given a chance to function as was originally intended. N.Y.S. Practical Nurses Association also stands for continuation of State licensing for its members.

A.F.L. Guild will introduce legislation for licensing nurses, according to its new field representative, Miss Nan Cuming, who formerly served as chairman of private duty section, N.Y.S.N.A.

Workshop

The A.N.A.'s workshop on economic security in Chicago, last month, brought together 70 representatives from 45 State nurses' associations. What was accomplished may only be guessed at, however, as the three-day sessions were closed to the press. A publicity handout claims that "fact finding, standard setting, public education, and negotiation with employers are steps which most of the nurses' associations report they expect to take this winter."

No national minimum salaries would be proposed, the publicity release said, and State nurses' associations would be urged to "encourage nurses to set their own employment standards on a State-wide basis" through sections representing different categories of nursing service. The national association will offer "consultation and field service," but responsibility for specific local programs must be carried by the States, as well, of course, as all costs.

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How to Remove Dandruff Completely

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1. **APPLY FITCH'S** directly from bottle onto the hair and scalp before any water is added. Massage well with hands, making sure shampoo reaches each part of scalp.

2. **ADD WATER GRADUALLY**, continuing to massage. Remove the cleansing lather as it forms. Then continue to add water until no more lather forms.

3. **RINSE THOROUGHLY** with clear water. Since Fitch's is completely soluble, no after-rinse is required. Set the hair and dry.

4. **FINISHED HAIRSTYLE** is soft and lovely. No trace of dandruff or dull soap film left to cloud its natural, sparkling highlights.

Fitch's Dandruff Remover Shampoo is the *only* shampoo made whose guarantee to remove dandruff with the first application has the backing of one of the world's largest insurance firms. Enjoy lustrous, dandruff-free hair! Ask for an economical bottle of Fitch's at your drug counter, or have professional applications at your beauty or barber shop.

LISTEN TO THE FITCH BANDWAGON,
starring **PHIL HARRIS** and **ALICE FAYE** every
Sunday evening over NBC, at 7:30 p.m. EST.



Fitch's Dandruff Remover Shampoo
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Des Moines 6, Iowa • Bayonne, N.J. • Los Angeles 21, Calif. • Jackson, Miss. • Toronto 2, Canada



for Your Patients!

Dry, cracked, "hospital lips" are common to your patients. **CHAP STICK—the medicated lip balm**—soothes, smooths, helps healing. Women patients who miss a lip stick find **CHAP STICK** most comforting. You'll be surprised how much your patients will appreciate your thoughtfulness when you suggest **CHAP STICK**. And never be without **CHAP STICK** yourself!

Write for
free sample



CHAP STICK CO., Lynchburg, Va.

Queen Elizabeth

[Continued from page 51]

for special duties, visits to patients, and reports to the Senior and Junior Medical Officers for consultation hours.

Sister Evans works with the Senior Medical Officer and is in charge of the First Class Cabin passengers, as well as the general direction of the nursing department. Sister Derrick supervises the hospital wards, and private rooms for both passengers and crew. There is also a completely equipped isolation hospital in another part of the ship, ready for any contagion that may appear. Another room is set aside for X-ray, and although the equipment is not large it is most efficient and the staff take care of developing the pictures.

The wards are cheerful, equipped with modern cots built of heavy chromium-plated, tubular steel. Each unit has its own call bell, lockup bedside cupboard, reading lamp, and waterproof draw curtain. Electric radiators and fans keep the atmosphere pleasant and comfortable.

Sister Farmer is in charge of the operating theatre, the equipment of which is comparable to that of any first-class hospital ashore. The operating table is a pedestal model, fitted with all accessories. It is illuminated by a large shadowless lamp, which cannot fail for it is connected to an emergency circuit as well as to the ship's central power plant. This O.R. is fully equipped with autoclaves, sterilizers, and a variety of instruments. Sister Farmer, who is also an

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concentrated power

The greater the concentration, the more effective the results.

A combination of highly potent quantities of vitamins known to be essential in human nutrition, in balanced therapeutic amounts, as in **Thera-Vita*** capsules, supplies the concentrated power necessary for effective results in cases of hypovitaminosis.

Thera-Vita capsules represent a highly potent, multivitamin preparation which has been designed specifically to meet the patient's need for large doses of the vitamins either as a therapeutic measure or as a corrective supplement in dietary insufficiency.

Thera-Vita therapeutic multivitamin capsules are easily swallowed, tasteless, and well-tolerated.

Each **Thera-Vita** multivitamin capsule contains:

Vitamin A (liver oil conc.)	12,500 U.S.P. Units
Thiamine Hydrochloride (B ₁)	10 mg.
Riboflavin (B ₂)	10 mg.
Niacinamide	100 mg.
Pyridoxine Hydrochloride (B ₆)	1 mg.
Calcium Pantothenate	10 mg.
Ascorbic Acid (Vitamin C)	150 mg.
Vitamin D (Activated Ergosterol)	1,250 U.S.P. Units

Bottles of 100's and 250



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PROFESSIONAL STYLE
COMFORT
SMARTNESS
And VALUE

GRIPPERS!
COMBED YARN
FINE BROADCLOTH
SANFORIZED

Easy to wash at home,
starching not necessary.
An excellent tailored style
made with set-in-belt, puffed
sleeves and flare skirt.

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Sizes 12 to 42
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Send for catalog which includes
sweaters and shoes
now available.

IMMEDIATE DELIVERY

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"You may recommend
GLYCO-Thymoline"

Many R.N.s use Glyco-
Thymoline in their practice.
Try it. Send for
professional samples.

GLYCO-
THYMOLINE

KRESS & OWEN CO. • NEW YORK 7, N. Y.

expert in massage and Swedish remedial exercises, supervises the physical therapy department as well.

After lunch, the afternoon is devoted to special treatments, patient care, and special visits. In the evening there is another session in the consulting rooms. Every third night one of the Sisters is on call; her name is given to the telephone operators, and if needed, she is called by the night watchman.

The proverbial English tea time is usually observed despite the busy days and at times only a few moments can be taken by the nurses. Tea is served in thin china cups from gleaming Sheffield silver. These table accessories are the same in all parts of the hospital, whether the patient is First or Tourist Class, or crew member. As Sister Derrick said, "when a person enters our hospital he is no longer a rating or a class, he is a patient, and the best of nursing care and service is given to him."

Each Sister has her own room with bath and lavatory facilities, a far cry from the wartime accommodations of American nurses who travelled on the *Queen Elizabeth*. Recreation hours are governed only by the time they can spare, although they try to go on deck at least twice a day. During the maiden voyage the nurses admitted that they had very little time to think of themselves, but it is plain that these women are not especially concerned with their own welfare—they are primarily interested in being good nurses. They are a part of the tradition of the sea, coupled with pride in their profession.

MUM'S THE WORD FOR
PERSPIRATION ODORS



Years of observation by our chemists and others show that while nearly all normal human perspiration is relatively free from odor as evolved, the development of odor may take place either on the skin or clothing.

For this reason MUM was specially formulated to do two important things: (1) To neutralize stale perspiration odors quickly and effectively without irritating the skin. (2) To function regardless of the type of clothing worn, and at the same time be harmless to fabrics.

A dainty, snow-white cream, MUM gives many hours of freedom from embarrassing perspiration odors. Why not try a jar of MUM today—and recommend it to your patients?

MUM

TAKES THE ODOR OUT OF STALE PERSPIRATION



A Product of BRISTOL-MYERS COMPANY, 19D W. 50th St., New York 20, N.Y.

A Holiday Tale

[Continued from page 33]

off her food, refuses to enjoy herself, and looks as though she didn't sleep too well, then there is something the matter. Don't tell me lies. Either you're sick or you're in love. Which is it, Nurse?"

"I'm quite well, thank you, Sister."

At that she smiled again.

When Sister smiles like that, she's rather a lamb. In fact she looked at me so kindly that I began to cry.

She got up and came round to me.

"You poor dear child," she said.

At that, of course, I only cried the more, but I stopped when she suddenly asked:

"Is it the young man in the snapshot?"

It would have been more dignified to have refused to answer, but I was past dignity now. My defences were down, and I found it very comforting to talk to somebody about it all. I sobbed out my story. How we'd been such friends and so happy, and then it had all gone wrong. He had said he could see I wasn't willing to give up my career and then he hadn't

come to see me any more.

"It was all a muddle," I said. "I wanted to finish my training, of course, but when he got angry with me, I wasn't going to explain. I never really knew," I sobbed, "how much I wanted him until I lost him."

"Just like poor little Harry," replied Sister, laughing.

"And now it's too late," I cried.

"Why?" asked Sister. "Why not put your pride in your pocket and whistle him back?"

"Oh! I couldn't," I faltered.

"Ring him up and wish him a happy Christmas," suggested Sister. "Tonight's a good time to do it."

"Oh! I couldn't," I said again.

"Then," said Sister calmly, "I'll do it for you."

She reached out and took up the receiver of the telephone.

I watched her, fascinated. My heart began to thump, my knees wobbled, at the thought of hearing his voice again. Sister gave the number. She gave his number. I stared at her. How did she know it? How could she know it? I was so startled I even forgot my beating heart.

Sister Dorcas, holding the re-



SAFETY FOR YOUR BABIES

Babies deserve the full protection—mothers appreciate all the convenience of these four Trimble helps:

KIDDIE-KOOP, the safety-scraped crib

TIP-TOP KIDDIE-BATH, to make baby bathing easy

KIDDIE-YARD, for protected, off-the-floor play

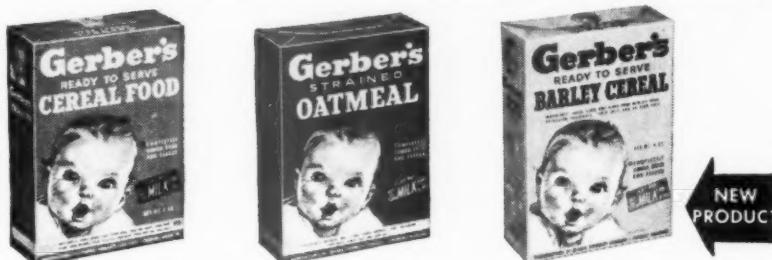
KIDDIE-TRAINER, for sound toilet training

New booklet "Making the World Safe for Baby" by Beulah France, R.N., gives much helpful information. Write: Trimble, 80 Wren St., Rochester 13, N.Y.



Trimble
NURSERYLAND FURNITURE

NOW REAL VARIETY IN BABY CEREALS



Three cereals different in taste— alike in high nutrition values

With the addition of the new Barley Cereal, Gerber's now offer three special cereals for babies.

These three cereals, Cereal Food (blue box) Strained Oatmeal (red box) and Barley Cereal (yellow box) have distinct differences in taste according to the grains from which they are made. All three meet the latest medical recommendations for infant nutrition.

For instance, each is rich in added B complex vitamins derived from a dried, specially grown primary yeast. Added iron, calcium, and phosphorus are provided in generous measure in all three cereals. Fine straining makes for easy digestion by infants as young as one month old. All three cereals are pre-cooked, ready to serve.

*Professional Reference Cards and samples of the three
Gerber's Cereals will be sent on request. Use coupon below.*



GERBER PRODUCTS COMPANY
Dept. 3512-6, Fremont, Michigan

Gentlemen: Kindly send me complimentary samples of Gerber's Barley Cereal as well as samples of Gerber's Cereal Food and Gerber's Strained Oatmeal and Professional Reference Cards.

Name.....

Address.....

City..... State.....



PERTUSSIN in successful use for over 30 years for COUGHS in

- Acute and Chronic Bronchitis
- Paroxysms of Bronchial Asthma
 - Whooping Cough
 - Dry Catarrhal Coughs
 - Smoker's Cough

In Pertussin—the active ingredient—Extract of Thyme (unique Taeschner Process) effects relief of coughs not due to organic disease, because it:

1. Relieves dryness by stimulating tracheo-bronchial glands.
2. Facilitates removal of viscid mucus.
3. Improves ciliary action.
4. Exerts a sedative action on irritated mucous membranes.

Pertussin is entirely free from opiates, chloroform and creosote. It is well tolerated by adults and children and is pleasant to take. It has no undesirable side action.



ceiver, saw me staring. She smiled.

"Don't look so startled, my dear," she said. "Everything is quite all right. He's very fond of you, you know. But it was only today that I knew it *was* you . . ."

Somebody had said "Hullo!" at the other end and it was a voice I knew. I think I should have run away, but Sister had a firm hold on my arm.

"Just a minute, Graham," she said, and pushed the receiver into my shaking hand.

"You're through, my child," she said gently.

She went out of the office and quietly closed the door.

It must have been half-an-hour or more before I went to call her back to the phone to wish her son a Happy Christmas.

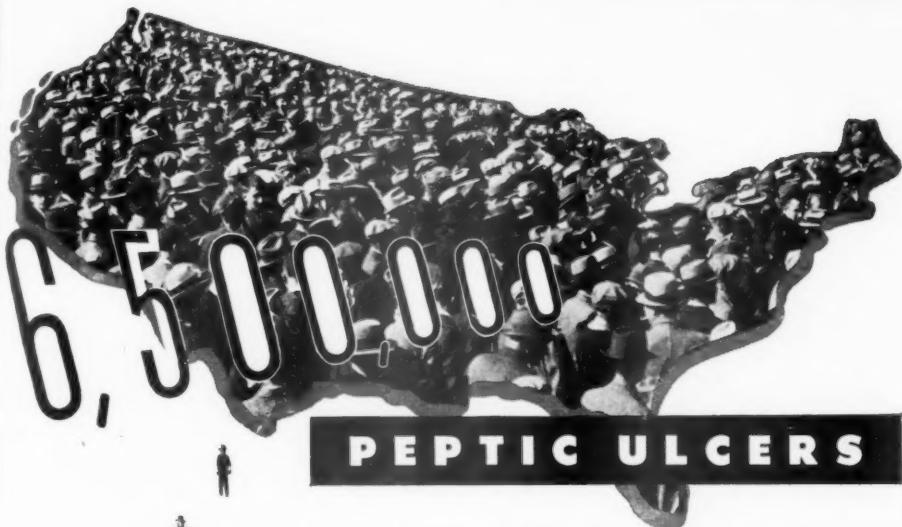
Your Future

[Continued from page 44]

the profession. If it functions effectively in informing and stimulating public opinion, your job in resolving the six issues that face you will be accomplished . . . *

It is true that many nursing problems and issues are solved on local geographic levels. But there are no State lines in the spread of ideas. Today you must think and act on a national scale. The speed with which ideas are transmitted by modern communications makes it impossible to do otherwise.

Furthermore, the emphasis on States Rights often prevents nurses



A recent conservative estimate places the incidence of peptic ulcer at 5 per cent of the population, or about 6,500,000 persons in the United States.* The great majority of this vast group of patients need a year-in and year-out program of rest, diet and acid neutralization.

Creamalin, the first aluminum hydroxide gel, readily and safely produces sustained reduction in gastric acidity. With Creamalin there is no compensatory reaction by the gastric mucosa, no acid "rebound," and no risk of alkalosis. Through the formation of a protective coating and a mild astringent effect, nonabsorbable Creamalin soothes the irritated gastric mucosa. Thus it rapidly relieves gastric pain and heartburn, and helps in the healing of peptic ulcers as well as in the prevention of ulcer recurrence.

Winthrop

CHEMICAL COMPANY, INC.
NEW YORK 13, N. Y. • WINDSOR, ONT.

Supplied in 8 fl. oz., 12 fl. oz.
and 16 fl. oz. bottles.

* Bureau of Health Education, A.M.A. Hygeia, 24:352, May, 1946.

CREAMALIN

Trademark Reg. U. S. Pat. Off. & Canada
The first brand of Aluminum hydroxide gel

You'll be interested

TO KNOW THAT IN
HOSPITAL TESTS

Vapo-Cresolene.

RELIEVED COUGH OF

Whooping Cough in 80% of cases
Bronchial Asthma in 78% of cases
Spasmodic Croup in 100% of cases

Bronchitis in . . . 83% of cases

Vapo-Cresolene reduces nasal
congestion, soothes and re-
lieves the throat irritation that
causes coughing.

Send for special
brochure

Established 1879

THE VAPO-CRESOLENE CO.
62 Cortlandt St., New York 7, N.Y.

Flattering...
Smart Style!

A New Original

**HOOVER
UNIFORM**

Step into tailored elegance in this stunning HOOVER original of crisp, white De Luxe Poplin featuring the season's new low-yoke line . . . tailored inverted box pleats . . . and smart, stand-away skirt pockets. Note how the youthful collar, squared sleeves, two-button detachable belt—flared skirt and sno-white buttons highlight the smart styling. Convenient coat style. Sizes 12 to 20—38 to 42.

Style **\$5.95** each
No. 493

HOOVER UNIFORMS
251 WEST 19th STREET
New York 11, N.Y.

HOOVER UNIFORMS,
251 W. 19th Street, New York 11, N.Y. RN-12

Please send me _____ Style No. 493 HOOVER

UNIFORMS, Sizes _____

NAME _____

ADDRESS _____

CITY and ZONE _____ STATE _____

from going from one State to another. It often makes it impossible for graduates of good nursing schools to practice where they choose, and to give service where it is needed. It creates D.P.'s—displaced persons—among nurses. Conditions arise in which nurses are plentiful in one State and critically scarce in a neighboring one.

This same insistence on States Rights has prevented nursing from progressing as fast as the national need demands. Here is an illustration: 48 different State laws affecting nursing registration obviously hinder public health and nursing progress, particularly if many regulations fail to maintain proper standards.

Many people in nursing are still playing State politics who should be engaged in national statesmanship. Before a strong American Nurses Association can be active in leading you and educating public opinion, you must be willing, eager, to give up some of your present local prerogatives and take the lead in setting up a strong national A.N.A. The A.N.A., if given the impetus and support it needs to do its part, could be the most effective spearhead toward solving the problems that face nursing and the public. With a strong A.N.A. the single mouthpiece for the profession, you will have forged the instrument with which you can influence and control your destinies.

[Condensed from an address before the Illinois State Nurses Association.—THE EDITORS.]



First Christmas

That first Christmas—when baby thrills to the light of a tree and each new gift brings laughter—is not alone the first meaningful holiday. It's the first long step between infancy and happy, active childhood.

Millions of babies have been helped to take this first step with genuinely good foods—for good health, for strong bodies and steady, sturdy growth.

WHITE HOUSE MILK

There's None Better

400 U.S.P. UNITS OF VITAMIN D₃
PER PINT

MADE, SOLD AND GUARANTEED BY A&P



*NOT CONNECTED WITH ANY COMPANY USING A SIMILAR NAME OR BRAND

Liquid Gold

[Continued from page 47]

shipped to some distant point, they are frozen solid.

Sampling begins the minute the ship touches the dock. In the beginning livers were sold by the pound, but when the total catch increased in 1941 the natural supply and demand decreased the income of the fisherman.

Mr. Bruce Sanford, chemist of the Fish and Wildlife Service, working with the facilities of a large processor, found the answer in the liver sampler. Now the livers are sold on the basis of millions of units of vitamin A per pound.

When the ships reach port today the sampling begins with an auger bit in a pipe, fastened to an electric motor. The tester drills three or four holes in each can and pieces of liver spill into a jar. Many jarfuls are emptied into a meat grinder where lumps are broken, then a homogenizer with rotary blades stirs the sample. In this way a quart sample from many quarts of the material will give a fair test.

Within a few hours the laboratory has a report on the potency of the catch and the fishermen who have been cleaning the hold preparatory for the next trip can be paid off on the basis of the pharmaceutical value of the catch.

The final analysis of vitamin A must rest with biological tests, or the effect upon rats, but the commercial determination rests upon "hitching a biological test to a machine." The machine is the Beekman Quartz Spectrophotometer which measures the degree to which vitamin A impedes the passage of ultraviolet light. Another quantitative test employs the dark blue color reaction for the vitamin.

The next step in preparation of the finished oil takes place in the commercial plant where the livers are processed and refined. There the livers are weighed, ground into a fine mass by a disintegration machine, and digested in a tank with steam and chemicals to separate the oil and protein. Finally the crude oil is refined by chemical means and blended for desired concentrations. In many plants the entire process is carried

How Long Does it Take You to Set Up an O₂ Tent?

Not very long when you've read the Oxygen Therapy Handbook. It makes procedures easy to understand.

The Oxygen Therapy Handbook is available as one of our services to users of LINDE oxygen U. S. P. Just ask for a copy, specifying the 1946 edition.

THE LINDE AIR PRODUCTS COMPANY

Unit of Union Carbide and Carbon Corporation

30 East 42nd St. UCC New York 17, N. Y.



"LINDE" OXYGEN U.S.P.



Twinkling through long centuries of European festivity and legend — gift-laden even back in Virgil's Rome (celebrating with "waxen images hanging from lofty pine"), the decorated evergreen has ever been symbolic of a spirit of brotherhood, peace, well-being.

Also closely related to well-being is the familiar Rexall sign of reliable pharmaceutical service, marking selected drug stores throughout the country. It tells you that here are Rexall products and prescription-compounding skill, both unsurpassed for quality control. Right in your own neighborhood there's sure to be a Rexall Drug Store.



REXALL FOR RELIABILITY

UNITED-REXALL DRUG CO.
LOS ANGELES, CALIFORNIA

Pharmaceutical chemists for more than 43 years



USE **THUM** TO DISCOURAGE
thumb sucking
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Acceptable
for Advertising
in Publications
of the
American Medical
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forecast*

No. 6700
Bruck's Shantlyn
(sanforized poplin) in
long or short sleeves. sizes:
10-20, 11-17, 38.
\$5.95

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Please send me No. 6700 uniforms,
size height weight
for which I enclose \$

Please send new illustrated uniform leaflet.

Name

Address

City & Zone State

out under carbon dioxide gas or some other means to prevent oxidation and consequent destruction of the unstable vitamin. Chemists test the oil at every step of the way and finally supervise concentration into a smaller volume by molecular distillation to separate the actual vitamin from the oil.

Animal breeders know that vitamin A is essential for proper maintenance of their stock and that vitamins pay in dollar return of proper growth and healthy animals. Many of the food companies use the vitamin to reinforce their products, the most outstanding being in oleomargarine where unitage is added to equal that of butter. But the most familiar vitamin A is in the little gelatin capsule, the pill, or liquid that is used in medicine.

The vitamin is unstable and among its peculiarities is that the light and air will make it lose some of its potency. So, it is well to remember to protect any form that is purchased, although under ordinary household conditions they will not lose an appreciable amount. The manufacturers allow something for these losses by an "overage" in the original preparation, but nevertheless, the capsules or pills should be kept in a cool, dark place. Because there may be some deterioration it is well to buy small sized bottles so that the loss can be held to a minimum.

In one test a full bottle of the oil and a partially filled bottle were stored in the same refrigerator for two months. The full bottle retained its original potency while the par-



Breakfast and the Daily Protein Need

The significance of breakfast in the satisfaction of nutritional requirements has been emphasized in many quarters in the recent past. Breakfast serves to replenish many nutrient stores depleted during the long fast from the previous evening meal, and provides the organism with caloric food energy needed for maximum efficiency during the morning hours. Hence nutrition authorities advise that breakfast should supply from one-fourth to one-third of the daily caloric and nutrient needs.

The morning meal should provide, among other things, its share of the daily protein requirement, since the protein needs must be met daily for proper growth of children and for good nutritional health of adults. In a basic breakfast so widely recommended—fruit, cereal, milk, bread and butter—the protein contribution is significantly high—20.7 Gm., or about 29 per cent of the adult requirement. Not a small amount of this protein is provided by the average serving of cereal (ready to eat or to be cooked), milk and sugar—fully 10 per cent of the adult daily protein need. Thus an important protein contribution is made by the basic breakfast, of which cereals are an in-

tegral and universally recommended component.

This average cereal serving also provides B complex vitamins, caloric food energy, and important minerals. Its mixture of proteins is of high biologic value, applicable for the satisfaction of growth and maintenance requirements. Note from the table of composite averages the contribution made by the cereal serving—1 ounce of cereal (whole grain, enriched, or restored to whole-grain values of thiamine, niacin, and iron), 4 ounces of milk, and 1 teaspoonful of sugar—and by the basic breakfast.

	Nutrition Composition of The Basic Breakfast*	Average represented by cereal, 1 oz.; whole milk, 4 oz.; sugar, 1 teaspoonful
Calories	611	202
Protein	20.7 Gm.	7.1 Gm.
Fat	19.0 Gm.	5.0 Gm.
Carbohydrate	89.4 Gm.	33.0 Gm.
Calcium	0.465 Gm.	0.156 Gm.
Iron	3.0 mg.	1.6 mg.
Vitamin A	1074 I.U.	193 I.U.
Thiamine	0.52 mg.	0.17 mg.
Riboflavin	0.87 mg.	0.24 mg.
Niacin	2.3 mg.	1.4 mg.
Ascorbic Acid	64.8 mg.	

*Orange juice, 4 oz.; cereal, 1 oz.; milk, 4 oz.; sugar, 1 tsp.; bread (enriched, white), 2 slices; butter, 1 tsp. (6 Gm.); milk, 8 oz.



The presence of this seal indicates that all nutritional statements in this advertisement have been found acceptable by the Council on Foods and Nutrition of the American Medical Association.

C E R E A L I N S T I T U T E, I N C.
135 SOUTH LA SALLE STREET • C H I C A G O 3

TRY THIS NEW CREAM
**FOR DRY SKIN
ROUGH HANDS**
AT NO COST TO YOU

An all-purpose lanolin compound cream, fully effective yet with none of natural lanolin's greasiness, stringiness or objectionable odor. LAMO (Nason's) cleanses and softens the skin, supplies fatty materials which may be lacking or removed by harsh detergents or antiseptics and at the same time affords protection more lasting than "Washable" ointments. Applied before going on duty LAMO gives this protection throughout the day; used after washing it soothes and restores the suppleness of the skin. LAMO is a valuable aid to nurses and technicians who wish to keep their skin soft and normal—as a matter of pride and for the comfort of their patients.

In 1-oz. and 4-oz. tubes and 1-lb. jars. At druggists or direct from Tailby-Nason Co., Boston 42, Mass.

THE ALL-PURPOSE
LANOLIN-BASE
CREAM

LAMO
(NASON'S)

MAIL THIS COUPON FOR FREE TUBE

TAILBY-NASON CO.

Kendall Sq. Station, Boston 42, Mass.

Please send me FREE Sample Tube of LAMO

NAME _____
HOSPITAL
OR FIRM _____

STREET _____

CITY _____ STATE _____ RN-12-46

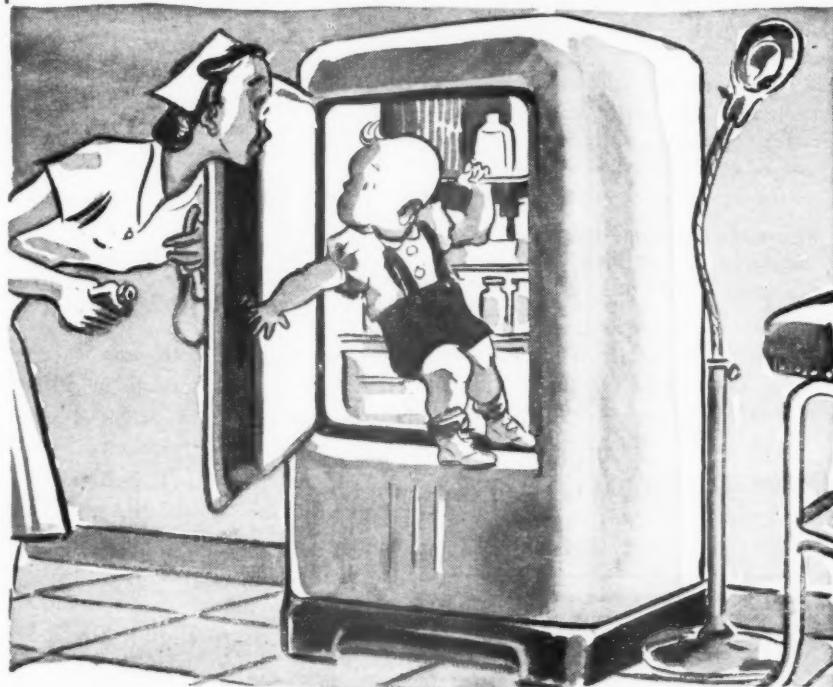
tially filled bottle lost about 60 per cent of its vitamin A value. Another bottle of cod liver oil of high potency was partially empty and was brought in and out of the refrigerator for four months. When tested at the end of that time no vitamin A was found. A capsule of vitamin A, also moved in and out of the refrigerator for four months, and labelled 4,000 units was found, on testing, to contain 5,200 units.

In other words, it would seem to be a sound practice to buy vitamin A in the capsule form and for the mothers of young babies who use the liquid form it is wise to purchase small bottles in order to overcome the variable loss of potency when the air space increases.

The present approved supplemental human requirement of vitamin A is 5,000 units per day. But complete answers pertaining to therapeutic use of higher amounts and the total effect of this vitamin remain unanswered. Some of the newer work includes the use of the vitamin to remove corns, treat acne, night vision, color blindness and, in the ointment form, it is being used for treatment of burns and fissured nipples.

There is not an over abundance of vitamin A and unless the large unit doses are prescribed by a physician there may be dangerous after-effects. In one reported case some fishermen tried "liver steak" and thereby ingested millions of units of vitamin A. They became acutely ill, ran a high fever, and later suffered extensive peeling. High dosage remains a medical matter and for most of the pop-

"I'm just makin' sure the doctor uses D-P-T!"



**He's pretty smart—to look for
better protection and less chance
of reaction with Cutter D-P-T**

With Phase I pertussis organisms *grown on human blood*, with toxoids *so purified* that each cc. contains far more than a single human dose . . . you avoid heterologous animal protein. Hence, with D-P-T, there is *less chance for reaction or anaphylactic shock*, *more chance of establishing a high immunity level*.

Too, with Cutter D-P-T, the concentration of both pertussis organisms and toxoids allows a more potent dosage in smaller volume. No king-size syringe to outrage either mother or little darling. Your dosage schedule is only 0.5 cc., 1 cc., 1 cc.

Cutter also makes D-P-T (*Albydrex*), which offers even further advantages. It

produces better immunity levels than alum precipitated vaccines. And, because of its more physiologically normal pH, it also presents less pain on injection. Persistent nodules and sterile abscesses are rare, rather than an expected contingency.

D-P-T works to your advantage, as well as your patients'. Try it, won't you?

Cutter Laboratories, Berkeley, California
Chicago . New York

CUTTER

Fine Biologicals and
Pharmaceutical Specialties

ENVIRONMENT

Your surroundings are an important factor in the achievement of your goal. Harmonious living and working conditions are necessary to your well being. They create an ease of manner which is reflected in increased vitality, enthusiasm for your work, attitude toward your associates, greater efficiency, and more time for diversion or study.

Functioning in your proper environment is investing in happiness, and pays extraordinary dividends.

It is just a matter of finding your particular spot. Your position is there waiting for you. Let us help you find it. Special attention is given to individual problems.

Ask for our Bulletin Service

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PERSONALIZED PROFESSIONAL SERVICE



FINEST FABRIC

Sanforized
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Write for
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GRADUATIONS

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NURSES PERSONAL SERVICE

175 FIFTH AVE., NEW YORK 10, N.Y.

ulation a well-balanced diet will take care of their vitamin A needs.

In the meantime when you do use the vitamin you may have greater respect for the bland oil as you remember something of the history of the sea and the aid of science that enter each measured drop.

Prepayment Plans

[Continued from page 37]

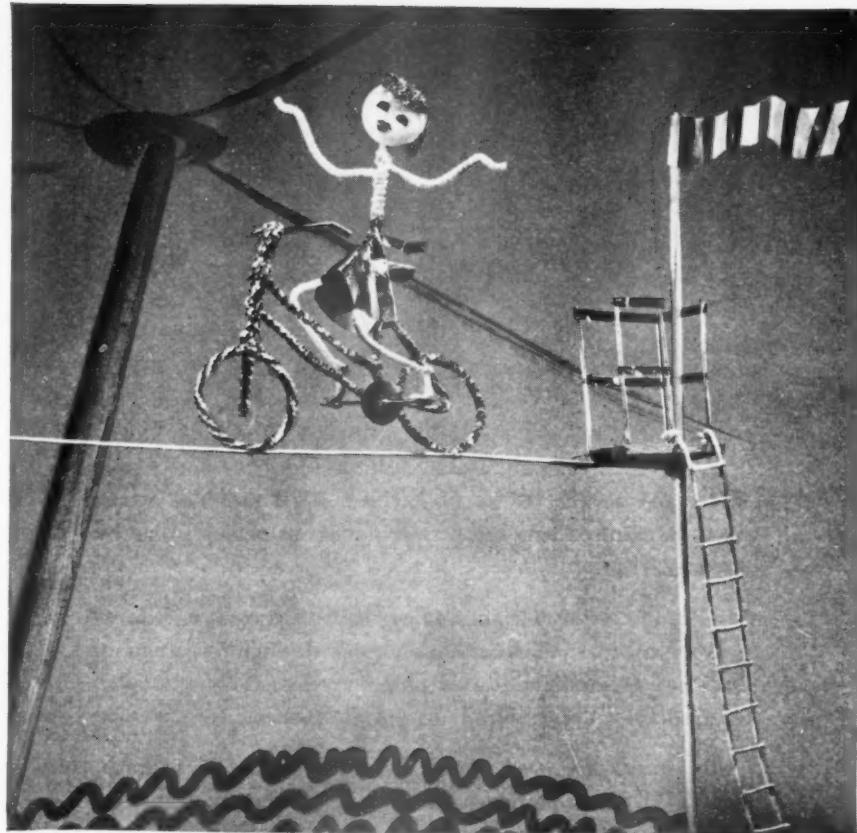
instance, offers both medical service and hospitalization in its own contract. Michigan and Massachusetts, on the other hand, work jointly—and closely—with the Blue Cross. And the medical societies of Wisconsin and Illinois have called in commercial insurance companies to do their prepayment job for them. Yet all the plans are eligible for A.M.A. approval.

A.M.C.P. is an infant and still weak, but it is growing rapidly. Although the pressure is off in Washington, the A.M.A. realizes that the voluntary movement must make substantial progress quickly, that it must move ahead even more spectacularly than the Blue Cross, which increased its subscribers from one million in 1937 to twenty-five million in 1946. The eventual goal for medical plans is seventy or eighty million subscribers (about the saturation point). A more immediate and important aim, says a spokesman, is an increase in enrollment from three million subscribers today to fifteen million by the end of 1947.

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KOLYNOS IS DELICATELY

Balanced

TOO!



Entertain your child patients with
"Kolynos Kids." They're easy to
make—send for free folder.

KOLYNOS
POWDER • PASTE

Just enough of the right cleansing and
polishing agents to do a thorough
job with complete safety . . . plus a
skillful combination of essential oils and
flavorings to provide refreshing,
wholesome taste. That's Kolynos!
It makes daily sessions with the tooth
brush an enjoyable habit to form.

These factors endow Kolynos with a
fine degree of balance to perform a truly
balanced service—the kind of service
you have every right to expect.

A Product of the

WHITEHALL PHARMACAL COMPANY, 22 E. 40th STREET, NEW YORK 16, N.Y.



Relief in
**RHEUMATIC
AFFECTIONS**

Massaged on affected areas, MINIT-RUB provides a convenient agent to help bring speedy relief to aching joints by counterirritation.

Recent pharmacologic studies show that counterirritants not only increase the local blood supply through reflex action, but tend to modify internal pathology by affecting trophic or vasomotor nerves supplying remote tissues.

By increasing local circulation and producing warmth, MINIT-RUB helps to relieve rheumatic pain and to permit more normal mobility. As an aid in alleviating "between visit" pain, home-massage with MINIT-RUB is recommended. Patients will be grateful for the suggestion, and office treatments will be more effective.

RECOMMEND SUPPLEMENTARY HOME-MASSAGE WITH MINIT-RUB
TO YOUR RHEUMATIC PATIENTS
MINIT-RUB IS ALSO EFFECTIVE IN SIMPLE MYALGIAS

MINIT-RUB

THE MODERN RUB-IN

STAINLESS • GREASELESS • VANISHING



A Product of Bristol-Myers, 19RN W. 50th St., New York 20, N.Y.

POSITIONS AVAILABLE

To apply, write a separate application for each opening and address to correct box number, care of R.N., Rutherford, New Jersey. [R.N. does not conduct an employment service, but forwards your inquiries to placement bureaus and individual employers. Send no money with application. Bureaus requiring a fee will send you a bill. ANSWER JOB ADVERTISEMENTS PROMPTLY!]

ANESTHETIST: Virginia. 200-bed hospital; must be certified; salary open. Apply: The King's Daughters' Hospital, Portsmouth, Va.

***ANESTHETIST:** Southern Wisconsin. One of leading hospitals; \$250; maintenance. (Placement bureau charges \$2 registration fee.) Box RN12-1.

***ANESTHETIST:** Southeast. Small private hospital in town of 50,000; \$300; maintenance. (Placement bureau charges \$2 registration fee.) Box RN12-2.

***ANESTHETIST:** Southeast. To head anesthesia dept.; must be well qualified; max. \$3,600; full maintenance; excellent living conditions. (Placement bureau charges \$2 registration fee.) Box C-271.

***ANESTHETIST:** California. To assist medical staff of 8 doctors and surgeons. (Placement bureau charges \$2 registration fee.) Box SM12-1.

ASSISTANT ANESTHETIST: North Carolina. 75-bed hospital; surgeon is a diplomate of American Board of Surgery; salary commensurate with qualifications. Apply: Scotland County Memorial Hospital, Laurinburg, N.C.

***ASSISTANT DIRECTOR:** Central metropolis. School of nursing and nursing service; \$3,600; meals, laundry. (Placement bureau charges \$2 registration fee.) Box RN12-3.

***COLLEGE NURSE:** Northern Illinois. In outpatient clinic of co-ed college; \$1,800 for 9-month term; full maintenance; laundry; 5½ day week; 10-day Christmas vacation. (Placement bureau charges \$2 registration fee.) Box C-272.

DENTAL ANESTHETIST: East. \$50-\$75 based on qualifications; 7½ hour day, 5½ day week. Apply: Box S-12.

***DIETITIAN:** Missouri. Salary open; full maintenance; 6-day week; vacation; sick leave. (Placement bureau charges \$2 registration fee.) Box SM12-2.

***DIRECTOR OF DIETETICS:** New York. 200-bed approved hospital; will have 3 assist-

ants and ample staff; \$3,000, full maintenance. (Placement bureau charges \$2 registration fee.) Box C-277.

***DIRECTOR OF NURSING:** East. 225-bed hospital, one hour from Manhattan; \$3,500, full maintenance with attractive apartment. (Placement bureau charges \$2 registration fee.) Box RN12-4.

EDUCATIONAL DIRECTOR: South Carolina. School of nursing operated under U.S. Cadet Nurse Corps program; approx. 56 students; basic sciences taught at Winthrop College; B.S. degree required; \$225, full maintenance. Apply: Supt. of Nurses, York County Hospital, Rock Hill, S.C.

***FIELD NURSING CONSULTANTS:** Middle West. Openings for candidates specialized in TB nursing, school nursing, pediatrics, generalized program; \$2,970-\$3,300. (Placement bureau charges \$2 registration fee.) Box RN12-5.

GENERAL DUTY NURSES: South Dakota. Two; small privately-owned hospitals; rotating day and night duty; \$150, partial maintenance. Apply: Josephine McKenna, Duggan Hospital, Wagner, S.D.

GENERAL DUTY NURSES: Michigan. \$180 with maintenance; \$185 nights; \$5 raise 3 and 6 months; vacation. Apply: Oakland County TB Sanatorium, Pontiac, Mich.

GENERAL DUTY NURSES: New York City. 185-bed hospital; 44-hour week; \$135, full maintenance; \$165, meals and laundry; additional \$10 for afternoon shift; vacation; sick leave; holidays. Apply: Supt. of Nurses, New York Eye and Ear Infirmary, 218 Second Avenue, New York 3, N.Y.

GENERAL DUTY NURSES: California. \$205, less \$45 for full maintenance; 40-hour week; TB hospital. Apply: Director, Sanatorium, Springville, Calif.

GENERAL DUTY NURSES: New York. 8-hour day; attractive salary; 45 min. from N.Y. City. Apply: Supt. of Nurses, Long Beach Hospital, Long Beach, N.Y.

GENERAL DUTY NURSES: Virginia. For labor and delivery room; nursery and central

*Listed by placement bureau.

DIET-BULK

that furnishes
Vitamin B₁, iron
and phosphorus!



Nabisco 100% Bran is a *real find* for patients who are troubled with constipation and need more diet-bulk. It's good-to-eat as a cereal and delicious, too, in muffins or cookies. Contains 3 important nutrients — Vitamin B₁, iron, and phosphorus!

Finer-milled, bran particles in Nabisco 100% Bran are smaller, "easier" on the patient. Mild and gentle in action.

Sold in pound or half-pound packages at foodstores.

finer-milled

TO MAKE BRAN PARTICLES SMALLER



BAKED BY NABISCO
NATIONAL BISCUIT COMPANY

supply; also medical-surgical nurses; \$145, maintenance; \$165, one meal and laundry; \$5 additional for 3-11 and 11-7 shifts; vacation. Apply: Supt. of Nursing, Alexandria Hospital, Alexandria, Va.

GENERAL DUTY NURSES: New Mexico. 60-bed hospital; 48-hour week; \$150, full maintenance. Apply: Supt., Silver City General Hospital, Silver City, N. Mex.

GENERAL DUTY NURSES: New York. 40-hour week; \$165; additional \$10 for evening and night duty; no maintenance; \$10 increases annually; vacation. Also operating room nurses and assistant anesthetist; \$175, full maintenance. Apply: Nursing Supervisor, John T. Mather Memorial Hospital, Port Jefferson, N. Y.

GENERAL DUTY NURSES: Idaho. Two; 20-bed modern county hospital; \$150, full maintenance. Apply: Supt. of Nurses, Oneida Hospital, Malad City, Idaho.

GENERAL DUTY NURSES: Texas. Three; 29-bed hospital on Mexican border; attractive nurses' home; \$150, full maintenance; 8-hour day, 6-day week. Also anesthetist, salary open. Apply: Maverick County Memorial Hospital, Eagle Pass, Tex.

HEAD NURSE: Minnesota. TB and laboratory experience preferred; eligible for Minnesota registration; 44-hour week; sick leave; low cost area close to twin cities; full maintenance; salary open. Apply: Supt. of Nurses, Buena Vista Sanatorium, Wabasha, Minn.

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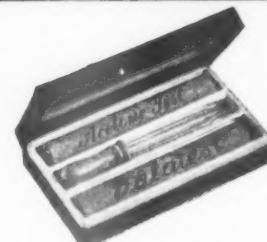
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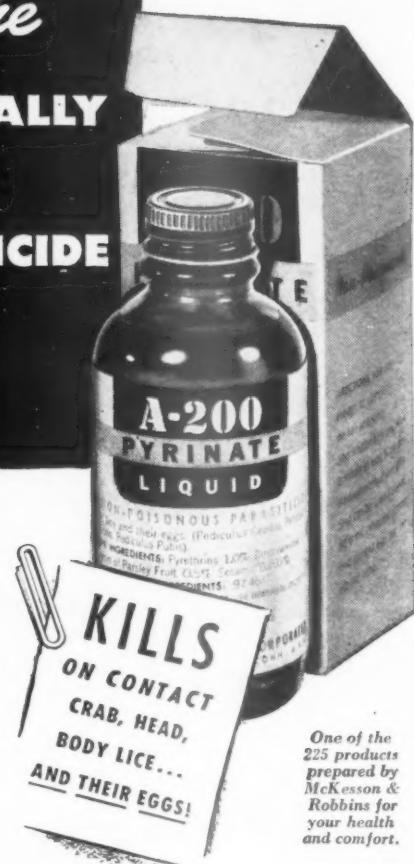
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